



Tibet Information Network

City Cloisters  
188-196 Old Street  
London  
EC1V 9FR UK.

tel: +44 (0)171 814 9011

fax: +44 (0)171 814 9015

email: tin@tibetinfo.net

www.tibetinfo.net

## TIN BACKGROUND BRIEFING PAPER

B22

### BIRTH CONTROL IN TIBET: DOCUMENTS AND LAWS

30 March 1994

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and as a limited company in England and Wales (No. 3226281).  
Registered address: 7a Southwood Hill, Muswell Hill Road, London N8 5UF

TIN USA - tel: +1 (0)307 733 4570  
5011c (3) fax: +1 (0)307 739 2501  
email: tinusa@wyoming.com

## Tibet Information Network March, 1994 Documents on Birth Control

### Contents

The TAR 1985 Birth Control "Guidelines" (TIN Doc. 2(XC)).....	1
The Ganze Birth Control "Procedure", 1989 (TIN Doc. 13(XB)).....	4
Supplementary Rules to the Marriage Law, Ganze .....	8
The Ganze Birth Control "Suggestions" and Quota Rules (1988-91) (TIN Doc. 7(XB)).....	9
[1] The Decision on How to Strengthen the Work of Planned Birth (CPC Central Committee, 1991).....	10
[5] Some Suggestions on Problems Arising from [...] the "Ganze Procedure", (Ganze, 1989).....	13
[7] Temporary Regulations on CPC Members [...] Who Violate the Ganze Procedure (Ganze, 1991) .....	18
[8] Planned Birth Work Target Management Responsibility System (Sichuan Government, 1988) .....	21
[9] Report on Further Strengthening Planned Birth Work (Sichuan Party and Government, 1990) .....	22
[10] Implementation of the Target Management Responsibility System in Planned Birth Work (Ganze, 1989) .....	25
[11] Announcement on Further Improving the Planned Birth Work Target (Ganze, 1991).....	27
TAR 1992 Birth Control Regulations (TIN Doc.1(XL)/18(YB)).....	28
Health: TAR Health Report for 1991 (TIN Doc. 10(XB)) .....	38
Tibetans on Birth Control: Interviews.....	46

### The TAR 1985 Birth Control "Guidelines" (TIN Doc. 2(XC))

Date Written: 28 February 1985

The original in TIN's possession is 6 pages long, consisting of 3 sheets of lightweight plain paper, each folded back onto itself and stapled together where the two cut edges meet, thus presenting two pages per sheet. On these two pages the text is printed in Tibetan by typewriter or metal press. It is stamped at the end with an official seal in red ink. The stamp is not completely legible but includes the words *Lhasa Chengguan Chu* (municipal) and the word *U-yon-lhen-khang* (committee). There are tidy corrections by hand in black pen to spelling and grammatical errors. There are graffiti on the bottom of page 1 in blue-black ink, mainly doodles in Chinese, as if testing a pen. Title: *Bod rang skyong ljongs 'char lden bu btsa'i 'go khrid tshogs chung gi yig cha bod 'cher lden bu btsa'i (1985) yig ang 01.*

#### Introduction

The "Established Guidelines Relevant to Granting Birth Permits" show that birth control was already in force in a provisional form in the TAR in 1985. The "Guidelines", formally entitled Document Number 1 (1985) of the TAR Planned Birth Leading Group, may be a summary which was issued to the public of the existing internal regulations.

The TAR Planned Birth Leading Group  
28th February 1985

### Established Guidelines Pertaining to the Issuance of Birth Permits [in accordance with] Planned Births.

#### TAR Planned Birth Leading Group, Document 1 (1985).

This document is addressed to the neighbourhood and municipal Planned Birth Departments as well as to [Party] committees [and] government departments at province, prefecture, and national [level] [Tibetan: *thing*,

The document details guidelines for issuing birth permits in the TAR. These rules allow urban Tibetans two, and under certain conditions, three children. Chinese in the TAR are allowed one child except in certain cases, such as when they are married to Tibetans, when they are permitted two children. The only sanctions imposed for breaking these rules are a fine of 500 yuan for Chinese and 150 yuan for Tibetans. In the case of Chinese, the fine is payable for the offence of having a child without holding a permit; in the case of Tibetans the offence is payable for the offence of having a child within three years of a previous birth without a holding a permit. In both cases there is no stated requirement for an unauthorised pregnancy to be aborted (a major concession for Chinese couples, who would face stricter rules in China) and once a fine has been paid a couple can obtain the permit to give birth. The Guidelines therefore appear to be an attempt to familiarise people with the procedure to applying for permits for birth. However, there is no indication of what should happen to a woman or parent who does not pay the fine other than the general statement that "those who do not heed this guidance [...] should be punished according to the seriousness of the case".

*cus*, *pu'u*, equivalent to Chinese *ting*, *ju*, *bu*), and to Party members [Tibetan: *tha'i yon - error for tang yon*], schools and members of the TAR Planned Birth Leading Group.

According to the TAR Planned Birth Document No.84 (1984), Document No.4, from 1985 onwards, in local neighbourhoods and towns (including Garmo) [Chinese: Golmud], [to allow a woman] to give birth the following year, Planned Birth Departments are authorised to issue birth permits and certificates of agreement to have only one child (hereafter single child certificates) at their discretion. [They have this discretion] because, as a result, the local neighbourhoods will [then] be in a position to plan balanced population growth and economic development based on the local situation with respect to [national plans for] productivity, population growth and economic development.

In 1985, based on discussions and examination of the ideas contained in Document No.84 (1984), Document No.7, the TAR established the following guidelines for the issuance of birth permits related to planned childbirth [‘*char ldan bu btsa’i*’]:

[Article] 1. If [a person] has their first child after the age of 24 years, it can be considered a late birth. If, upon reaching 24 years of age, [a person] expresses a desire to have a child, that person shall not be subjected to limitations under the plan. The person shall give their household registration number, and [submit] an application for pregnancy, [accompanied by] a testimonial letter from the neighbourhood or town Planned Birth Office. Specialist workers may then initiate the processing of birth permits from the local neighbourhoods or towns. If one member of the couple is a member of the army, then it shall be the responsibility of the army to secure birth permits and single child certificates according to the Tibet Planned Birth Document No.84 (1984), Document No.4. The local authorities should continue to take responsibility for contributing half the expenses for the first child congratulatory reward and maintenance. If the woman is working in the local neighbourhood, her maternity leave shall be in accordance with the local policies in force [at the time].

[Article] 2. Chinese working in Tibet, whether cadres, workers [‘*las bzo*’] or those on the household register, are entitled to give birth to a second child, provided they fulfil one of the following conditions:

- a) Where the first child is pronounced permanently handicapped by a hospital above the level of district hospital.
- b) Where the couple, after a long period of marriage (at least five years), have not conceived and they have adopted a child but [then] conceive, they may apply for permission to have that child.
- c) Where it is a second marriage and one member of the couple has a child from his or her previous marriage and the couple expresses a desire to have a second child.
- d) Where [it is a second marriage and] both members of the couple have a child from their previous marriages, they may apply to have another child.

e) Where both members of the couple pledged to have a single child prior to their marriage, they may apply to have another child.

f) Where [a person of] Chinese nationality marries a person from a national minority.

Where a couple give birth under one of the above categories a, b, c or f, the interval between the previous birth and the new birth should be more than three years.

Where a couple give birth within three years [of a previous birth] without obtaining authorisation from the planned birth section office, the local planned birth authorities of the neighbourhoods and towns are responsible for collecting one automatic fine of 500 yuan, after which a birth permit may be arranged. When collected, the fine should be noted in the planned birth accounts.

[Article] 3. According to the Tibet Communist Party Propaganda Document No.83 (1983), Document 15, couples who are Tibetans or members of national minorities [and] who are working as cadres, workers and those on the household register, may give birth to a second child, but the gap between these two children must be three years. If they fulfil one of the following criteria, they may apply to give birth to a third child:

- a) Where the couple has two children, but due to illness one child cannot grow into a healthy and energetic worker.
- b) Where the couple [in a second marriage] have two children, one from each of their previous marriages.
- c) Where one member of the couple in a second marriage has two children from his or her previous marriage, but wishes to have another child.

As to these three conditions governing giving birth to a third child, the minimum interval between the last two children should be three years. Where a couple gives birth [with an interval of] less than three years without obtaining authorisation from the planned birth section office, the local planned birth authorities of the neighbourhoods and towns are responsible for collecting one automatic fine of 150 yuan, after which a birth permit may be arranged. The collected fine should be noted in the planned birth accounts.

[Article] 4. Where a woman is subject to the two-child restriction and is on the household register of a town or city [‘*grong rda*’], if she meets one of the following criteria, she may apply to give birth to a third child:

- a) Where the couple already have two children, both of the same sex.
- b) Where each member of the couple in a second marriage has a child from their previous marriage.
- c) Where one member of the couple in a second marriage has two children from his or her

previous marriage, but wishes to have another child.

Concerning these conditions governing giving birth to a third child, the minimum interval between the last two children should be three years. Where a couple gives birth with [an interval of less than] three years without obtaining authorisation from the planned birth section office, the local planned birth authorities of the neighbourhoods and towns are responsible for collecting one automatic fine of 100 yuan, after which a birth permit may be arranged. The collected fine should be noted in the planned birth accounts.

[Article] 5. The birth permit is to be issued by the section responsible for the neighbourhood in which the woman is on the household register (members of the armed forces are excluded).

People working for local neighbourhoods and household registration in connection with birth permits must take their responsibilities seriously. Details on the permit should be filled in meticulously and accurately. Birth permits should not be returned blank. Young people should, in the interest of the Party and country, respond

with enthusiasm and voluntarily postpone marriage, postpone pregnancy and conscientiously prevent conception. The relevant Planned Birth Departments should provide proper guidance to those who give birth before the permitted age. Those who do not heed this guidance and the preventive measures should be punished according to the seriousness of the case.

[Applications for] those who cannot undergo operations because of an illness such as a severe infection of the womb, hypertension, or heart problems, may be processed for the issuance of a birth permit based on a medical report from a hospital. Only then can they have a child.

The Planned Birth Departments in the local neighbourhoods and towns should implement the programme effectively, based on the above [regulations]. Any recommendations or suggestions concerning implemented programmes should be communicated in writing as soon as possible to the TAR Planned Birth Department.

28th February 1985.

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[end of TIN Doc. 2(XC)]



# The Ganze Birth Control "Procedure", 1989 (TIN Doc. 13(XB))

Date Written: July 1989, published this edition August 1991,

Original: Pocket sized (3.5" x 5") paperback booklet, bound with yellow cover printed in Chinese in black ink. There are 17 numbered pages of text, plus one page table of contents and a cover page. No colophon or restrictions are marked.

Title in Chinese: *Ganze Zangzu zizhizhou "jihua shengyu banfa" ji "hunyin fa" buchong guiding*

Title: Supplementary Regulations of the Ganze Tibetan Autonomous Prefecture Concerning "Planned Birth Methods" and "Marriage Law"

## Introduction

Ganze, an area known to Tibetans as Kandze or Kanze, is a Tibetan Autonomous Prefecture within Sichuan Province. It was traditionally part of the Tibetan province of Kham. This booklet contains the "Procedure" or regulations for "planned birth", as well as additional regulations concerning marriage laws. The "Procedure" is based on the principle of "advocating" one child per family. Unlike the 1985 TAR regulations, it does apply to the countryside, it bans out of plan births even if a fine has been paid, and it refers to compulsory abortions. It allows certain categories to have two children, including urban Tibetans, Chinese farmers and vegetable growers, Chinese officials who have lived in the area for more than 8 years, and Chinese who are married to Tibetans. Most rural Tibetans and Chinese farmers in remote areas can have three children. Fines for having an out of plan birth are linked to income, starting at 15% of an individual's income or 20% of a couple's annual income and continuing for 7 years, with a minimum of 900 yuan. The "Procedure" includes eugenic laws, and orders compulsory abortion in the case of a couple with a "serious hereditary disease". There is no explicit discussion as to whether or not there is compulsory abortions for all other cases of unauthorised pregnancy, even if a fine has been paid. Sterilisation "must be advocated" for Chinese with two children and rural Tibetans with three children.

[Cover]

## The Procedure [*banfa*] for Planned Birth in the Ganze Tibetan Autonomous Prefecture and the Supplementary Rules of the Ganze Tibetan Prefecture for the Implementation of the Marriage Law of the PRC

Reprinted by the School for Education on Basic Knowledge of Population and Planned Birth, Huding County, August 1991

[Implemented on 1 July 1989]

### Table of Contents

The Procedure [*banfa*] for Planned Birth in the Ganze Tibetan Autonomous Prefecture ..... 1

The Supplementary Rules of the Ganze Tibetan Prefecture for the Implementation of The Marriage Law of the PRC ..... 15

[page 1]

### The Procedure for Planned Birth in the Ganze Tibetan Autonomous Prefecture

(Passed on 24 June 1988 at the 27th Meeting of the Standing Committee of the 5th session of the Ganze Tibetan Autonomous Prefecture People's Congress; approved by the 9th Meeting of the Standing Committee of the 7th session of the Sichuan Provincial People's Congress on 8 May 1989)

#### Chapter 1: General rules

Article 1. In order to implement planned birth, control population quantity, raise population quality, and fit population growth to economic and social development, this Procedure was devised, in the light of the realities of our prefecture, according to the Sichuan Provincial Planned Birth Regulations, the Ganze Tibetan Autonomous Prefecture Autonomy Rules and the Supplementary Regulations of the Ganze Tibetan Autonomous Prefecture for the Implementation of the Marriage Law of the PRC.

Article 2. Both husband and wife bear responsibility for practising planned birth.

Article 3. Implementation of planned birth must be based mainly on ideological education [*sixiang jiaoyu*], assisted

by any necessary administrative and economic methods. Late marriage, late childbearing, fewer births, quality birth and upbringing [*yousheng youyu*] must all be realised.

Article 4. Each level of the people's government of the prefecture must strengthen their leadership of planned birth work and be responsible for the implementation of this procedure. Each work unit must practise the planned birth work responsibility system [*jihua shengyu gongzuo zeren zhi*], and each relevant department must exercise its responsibility according to its division.

Neighbourhood committees and village residential committees must establish systems relevant to the successful implementation of planned birth policies.

Article 5. The prefecture and county planned birth committees are departments of the same level of the people's government, responsible for planned birth work. The Planned Birth Working Party of the district administrative office and the village (town) people's government are responsible for planned birth work within the district and villages (towns).

## **Chapter 2: Late marriage, late childbearing and planned birth**

Article 6. late marriage and late childbearing must be advocated and encouraged.

The marriage of a man and a woman that takes place three years later than the legal age of marriage is called late marriage [*wanahun*]. Childbearing by a woman four years later than the legal age of marriage is late childbirth [*wanyu*].

Article 7. Birth must be carried out according to the plan to advocate and encourage that a couple only have one child.

No illegitimate births [*bu de feihun shengyu*].

Article 8. Couples from one of the following categories can have a second child after approval:

1) Workers and urban residents [*chengzhen jumin*] from minority nationalities.

2) Han peasants, herdsmen, and market gardeners [*cainong*].

3) Han workers who have worked in extremely cold and remote mountainous areas for over eight years and Han residents who have held residence certificates in these areas for over eight years.

Han workers and urban residents from one of the following groups can also have a second child:

1) Those whose first child has a non-hereditary disease which will stop him from normal labour [*zhengchang laodongli*].

2) Couples who are both the only child in their family or where one of their family has had only one child for more than two generations.

3) Disabled soldiers whose disability is rated above grade A class 2, or where either of the couple has been injured while carrying out public work and their resulting disability is rated at or over grade A class two of the disability rate for soldiers.

4) When the family of one of the couple has only one among his or her blood siblings who can give birth.

5) Where one member of the couple, who is remarrying after a divorce, has had only one child in his or her previous marriage, and the other has had none.

Article 9. Couples who fit into one of the following categories can have a third child after approval:

1) Families of minority nationality peasants or herdsmen who have real problems.

2) Disabled soldiers whose disability rates above grade A class 2 for minority workers, residents and market gardeners; or where the injury of one of the couple hurt due to work for the state is equivalent to disabled soldiers of grade A class 2.

3) Where one member of a couple is remarrying after divorce and previously has had two children, and the other has none, or each of them have only one, among minority nationality workers, residents and market gardeners and Han peasants and herdsmen.

4) Where one of the couple is remarrying because of the death of his or her spouse and has no more than two children, and the other has no child, or each of the couple remarrying has only one child.

5) Han peasants and herdsmen living scattered among extremely cold and remote mountainous areas who have real problems.

Article 10. The interval between births should be more than three years; for women living in extremely cold mountainous areas who were over 28 when they first gave birth, this can be reduced to two years.

Couples who meet the conditions in articles 8, 9 and 10 who want to bear children must apply so they can be included in the birth plan, after approval from the main departments responsible at county level.

Article 11. This procedure applies to workers in provincial industries within the prefecture whose own or whose wife's formal residential certificate is from within the prefecture.

This procedure also applies to Tibetans returned from abroad, Chinese returned from abroad, Taiwan compatriots, and Hong Kong compatriots who are resident in our prefecture.

The registration location of couples who have one non-agricultural residential permit, and one agricultural residential permit, is determined by the woman's formal residential status.

The status of couples one of whom is minority and the other is Han Chinese is determined by relevant minority planned birth rules.

## **Chapter 3: Procedure for quality birth [*you sheng*], advanced upbringing [*you yu*] and control of contraception.**

Article 12. Each medical institution, women and infants' welfare work unit, and technical guidance propaganda work unit must establish clinical departments offering technical guidance and services on aspects of superior birth and upbringing to couples old enough to bear children.

A health examination should be undertaken before marriage.

Marriage and birth should be guided by the principles of quality birth and planned birth.

Couples who have serious hereditary diseases such as hereditary mental illness, mental disability, or physical deformity must be forbidden from giving birth. Pregnancies begun must be stopped.

Article 13. Planned Birth must be by the combined method, with contraception the main method.

It must be advocated that one member of a couple who are cadres, workers, urban residents, market gardeners, or Han peasants with two children or minority peasants and herdsmen with three children, is sterilized [*cai qu jue yu cuo shi*]. Those not suited to sterilization must adopt other methods of contraception.

Couples old enough to bear children should be given contraceptive medicine and equipment free of charge.

Article 14. All medical institutes, women and infants' welfare units and planned birth propaganda technical guidance work units must be equipped with operation equipment [*shou shu qi xie*]. The planned birth operation must be carried out by medical staff with certificates for operation issued by medical administrative departments or planned birth departments above county level, in order to secure the health and safety of those undergoing operations.

The expenses for planned birth operations on state employees and workers from industries in the collective ownership of cities and villages should be covered from the medical funds of their respective work unit; the expenses of city and township residents, and peasants and herdsmen, should also be covered from planned birth funds.

Article 15. Those who have had sterilization operations and are now allowed another birth because of a change in their conditions should, with a certificate issued by their unit, and with the approval of the main department responsible for planned birth at county level, have a re-connecting operation at a designated medical unit.

Article 16. Those who have contracted diseases accompanying or caused by the planned birth operation should have their illness confirmed through diagnosis by a planned birth technical guidance group from above county level. Once confirmed, during the period of treatment, state employees or employees of industries under the collective ownership of cities and villages will be given their salary as usual, and enjoy all non-production welfare benefits; peasants and herdsmen will be spared their collective volunteer labour for the year and their treatment expenses will be dealt with according to the rules for planned birth operation fees.

#### Chapter 4: Punishment and reward

Article 17. Couples in which both members are state employees or workers in collectively-owned industries in towns and villages who were married late will have ten days' extra holiday in addition to the normal state marriage leave; 20 extra days will be added to the state normal days of maternity leave to those who begin

childbearing late [*wan yu*]. Both marriage leave and maternity leave will be considered working days.

Peasants who start childbearing can be spared collective volunteer labour for that year.

Article 18. Couples who are able to conceive, who have only one child in less than 14 calendar years, and who have already taken up a method of contraception and no longer conceive, will apply, with their application confirmed by their work units and approved by the village (town) people's government, for a single child certificate from the county planned birth committee. The birth of twins or triplets will not be seen as single child.

Article 19. Those who hold single child family certificates will enjoy the following benefits and rewards:

1) According to the standards issued by the Prefectural People's Government, the grant for the welfare of a single child will be issued from the date of issue of the certificate up until when the child reaches 14 years of age. The fee will be covered, 50% each, by the respective work units of the parents.

Welfare grants for single children of couples who are state employees, or workers for industries collectively owned by towns and villages, will be covered by the finance department according to relevant regulations.

Welfare grants for single children of couples who are peasants, herdsmen and unemployed urban residents, will be covered by the county planned birth campaign [*shi yue*] funds, or the penalty fees collected for extra births from all places [*ge di*].

Families of urban individual entrepreneurs will be treated according to other relevant regulations.

2) With regard to medication, entering kindergarten, college recruitment, and employment as workers, cadres, etc, a single child will be given preference when all other conditions are equal.

3) A single child family will be given preference in residency provision and in help from poverty projects in the countryside and in nomadic areas.

Article 20. Each level of the people's government or relevant department will praise and reward areas, work units and individuals with remarkable achievements in planned birth.

Areas, work units and individuals who do not thoroughly carry out this procedure will be criticised and educated by the people's government of their own, or higher, level. They should be reprimanded and a deadline set by which they should improve their work.

Article 21. Those who do not accept education and who violate articles 7 to 10 of this procedure, [regarding] giving birth to an extra baby, will be punished in this way: an extra birth fee will be charged for seven years after the date of the birth of the child.

The amount is 15% of the wages or 20% of the annual income of couples. The fee can be levied all at once or



by instalments. The total amount is to be no less than 900 yuan. Those who carry on giving birth will have their fees for extra births increased.

During a pregnancy outside the plan [*jī hua wēi*], the 15 yuan fee for pregnancy outside the plan will be taken each month from both the man and the woman. When the pregnancy stops, all the money taken will be refunded. Those who still insist on giving birth will have this amount taken from them until the time when they have fulfilled the required interval between births, as laid out by this procedure.

Those who conceive before reaching legal marriage age will be charged a birth-outside-the-plan fee of 25 yuan each month from both the man and the woman from the date of birth until after the ninth month after they have received a marriage certificate.

Birth outside marriage is illegal. Apart from criticism, for the first illegitimate birth a fee of 1000 yuan will be charged simultaneously from both the man and the woman. The father must pay at least 60% of the total penalty.

Those who have an illegitimate birth with no formal residential certificates for our prefecture will be fined a minimum of 1,000 yuan by the place where the birth occurred before being returned to their hometown to be treated there according to their local regulations.

The recruitment [*zhao sheng* - sic] fees, fees for pregnancy outside the plan and for birth outside the plan should only be used for planned birth purposes. The management and use of this fee is carried out under the guidance of the provincial planned birth committee and the provincial department of finance.

Article 22. Cadres and workers who give birth to additional or illegitimate children or give birth outside the plan will suffer economic sanctions as prescribed in this procedure. Their respective work units also have to be subjected to the necessary administrative disciplinary measures according to their circumstances.

Article 23. [Cadres and workers] who have already had single child certificates [who have extra births, or illegitimate births] will have their single child benefit and privileged treatment [*you dai*] stopped from the month of the issue of the certificate. They will be deprived of the certificate.

Those who give birth without permission will be deprived of their single child benefits and privileged treatment, and of their single child certificates and their welfare fees. They will also be punished according to the punishments in article 21 and article 22.

Article 24. Workers, medical staff, marriage registration personnel and other state employees who work in the field of planned birth who violate this procedure and whose behaviour is [affected by] nepotism and who give and take bribes will be criticised and [subjected to] education or administrative disciplinary measures by their work units or by their superior departments. Those whose behaviour constitutes a crime will be investigated for penal responsibility by the legal departments.

Persons who have direct responsibility for an accident in the course of a planned birth operation will be dealt with according to the relevant rules.

Article 25. Those who humiliate, threaten or assault planned birth workers and medical personnel, or use other forms to hinder the normal undertaking of planned birth work, will be dealt with by the public security offices according to the rules of management and punishment for the security of the PRC; those whose actions constitute a crime will be investigated for penal responsibility by the legal institution.

Article 26. It is forbidden to drown, abandon, or smuggle infants; it is forbidden to maltreat female infants or the mother of female infants. Those who exhibit the above mentioned behaviour will either be criticised and given education or administrative reprimands by their work unit or related departments or investigated for penal responsibility by the legal offices if their behaviour constitutes a crime.

It is forbidden to remove a planned birth coil illegally. The income [obtained] from illegally removing planned birth barriers will be taken in addition to a fine of over 500 yuan. A more severe punishment will be given to those who repeat such mistakes. Those who cause personal harm will be investigated for penal responsibility by the legal departments.

Article 27. The punishment for those who violate this procedure and who deserve punishment according to the rules of the department responsible for planned birth should be applied by the basic unit planned birth working organs and the decision should reach the punished person with the approval of the village (or town) people's government.

When the punished person disagrees with the decision, he or she can apply for re-examination of their case to the superior department with main responsibility for planned birth within 20 days of receiving the punishment decision. The decision will be put into effect for those who do not apply until after the deadline.

The decision to re-examine [the case] by the superior department with main responsibility for planned birth is final.

When the punished person does not carry out the decision, he or she will be forced to by the county department with main responsibility for planned birth after applying to the people's court. When the people's court which receives the application discovers there are genuine mistakes in the original decision, it should not carry out the [original] decision and should inform the organ applying [the punishment].

Article 28. The department with main responsibility for planned birth must correct mistakes if any are found in the decision [once it is] already functioning.

## Chapter 5: Attachment

Article 29. The prefectural people's government can make rules and regulations to solve problems [arising] in the implementation of this procedure. The questions



arising from the detailed practice of this procedure will be explained by the Prefecture planned birth committee.

Article 30. The procedure is to be implemented on 1 July 1989. Any relevant planned birth rules made by this

prefecture before the implementation of this procedure which contradict this procedure should be abolished. Those questions already solved according to existing rules will not be altered.

[page 15]

## Supplementary Rules of the Ganze Tibetan Prefecture for the Implementation of the Marriage Law of the PRC.

(Passed at the 6th meeting of the standing committee of the 4th session of the people's congress of Ganze Prefecture on 19 November 1981)

Article 1. These supplementary rules are made with reference to article 36 of the marriage law of the PRC.

Article 2. The marriage age of a man should be not less than 20 years and of a woman not less than 18 years.

Article 3. It is forbidden for a man to have more than one wife, or for a woman to have more than one husband. The above form of marriage, [if] existing before the implementation of this supplementary rule, will be maintained if the people involved do not wish it to be abolished.

Article 4. It is forbidden to arrange marriages [*baoban*], purchase and sell marriage, or demand body fees, dowry fees and other goods in the name of marriage.

Article 5. The practice of substitution [*dingti* - substituting one marriage partner in the absence of another? - translator's note] or of replacement [*zhuanfang* - a widow marrying the brother of her former husband? - translator's note] in marriage relationship is against marriage freedom and against the principle of voluntary [participation] and should be forbidden.

Article 6. It is forbidden to inter-marry between direct relatives and with relatives within three generations.

Article 7. It is forbidden to use religion, family kinship [*jiazh*] or other similar methods to interfere with freedom of marriage.

Article 8. New style weddings should be advocated. The traditional marriage and wedding ceremonies of the minorities should be respected provided that they do not violate the basic principle of the marriage laws.

Article 9. The father of an illegitimate child must be responsible for part or all of the necessary living expenses and educational expenses. The custom that all these be covered by the mother should be changed.

Article 10. Legal procedures should be adopted for marriage and divorce.

Article 11. Where articles of the marriage law of the PRC are not supplemented or changed by this supplementary rule, the original marriage law of the PRC should be followed.

Article 12. Those who violate this supplementary rule should be given administrative punishment or legal punishment according to the circumstances.

Article 13. The supplementary rule is suited to each of our minorities and also applies to Han Chinese who marry minorities.

Article 14. This supplementary rule will be implemented as of 1st July 1982.

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[end of TIN Doc.13(XB)]

# The Ganze Birth Control Commentaries and Quota Rules (TIN Doc. 7(XB))

Date issued: (Ganze) August 1991

The original in TIN's possession is a paperback booklet containing 11 official documents on birth control. It is bound with yellow paper covers, with red typeface on a beige cover, and printed in both Chinese and Tibetan. The front cover is mostly in Chinese, with the title appearing in both Chinese and Tibetan. Portions of book in Chinese are followed by portions in Tibetan. The Tibetan sections are pp 9, 11-34, & 53-73. There are 100 numbered pages of text, and a two-page table of contents. The endpage colophon in Chinese.

Status: The document is Marked in Chinese (but not Tibetan): "Internal Document - Take Care to Preserve [confidentiality]". Page 1 is marked as a One Star Party document.

Title in Tibetan: 'Char idan skye btsa'i yig cha phyogs sgrig  
Title in Chinese pinyin: Jihua shengyu wenjian huibian  
Title in English: Collection of Planned Birth Documents, No.5.

## Introduction

In 1991 the authorities (that is, both the Party and Government organs) in Ganze Tibetan Autonomous Prefecture issued for internal distribution a booklet called the "Collection of Planned Birth Documents, No.5.". The booklet contained Chinese and Tibetan versions of official commentaries and additions to the 1989 "Procedure" on birth control. The booklet contained 11 documents, of which three (Nos. 2, 3 and 6) are simple announcements of approval or implementation by the relevant local congress. The other eight are substantive texts on the subject of birth control for the general population, birth control for Party members, and the quota system for birth control officials. The documents are arranged with the most recent one printed first, and the highest level one printed before the lower level. They therefore have to read partly in reverse order to see the historical development of these regulations.

The first item in the booklet is a 1991 directive from the Central authorities in Beijing. This is followed by item No.4, the Ganze Prefecture regulations (the "Procedure") which were implemented as a result of an earlier central directive, which is not included in the collection. Then there is the main text, the "Suggestions", a commentary or explanation of the regulations in Ganze "Procedure" (No.5). This is followed by No.7, the special birth control regulations for Party members.

Then the quota system is described in a directive from the Sichuan Government in 1988 ordering the implementation of quotas (No.8). The 1989 prefecture-level equivalent of these quota regulations is printed as No.10, with an improved set of quota regulations issued at prefecture-level in 1991 (No.11).

[cover]

Internal Document - Take Care to Preserve [Confidentiality]

## Collection of Documents on Planned Birth, No.5

Edited and printed by the Ganze Tibet Autonomous  
Prefecture Committee for Planned Birth  
August 1991

[contents page]

### Table of Contents

1. The Decision of the State Council [and] the Communist Party Central Committee on How to Strengthen the Work of Planned Birth and Strictly Control Population Growth  
[Central] Committee Document No.9 (1991) [Chinese text]..... 1
2. The Decision of the Standing Committee of the People's Congress of Sichuan Province to Approve

Finally, No.9 is a directive issued by the Sichuan Province Party Committee in 1990, called the "Report On Further Strengthening the Work of Planned Birth".

The various documents in the collection show that earlier regulations on birth control were constantly being evaded, and in these documents the authorities devise means to plug loopholes and to encourage stricter implementation of earlier regulations. Officials who have interpreted clauses too liberally are criticised in the 1990 Sichuan "Report", and the Ganze "Suggestions" spell out the correct interpretations of several clauses - saying for example that not just one but both members of a Chinese couple must have lived in the area for eight years before qualifying for an extra child. However, these commentaries still leave major issues ambiguous. There is, for example, still no guidance as to whether compulsory terminations can be applied in the event of an unauthorised birth.

Sterilisation is "advocated" after two children for townspeople and three for most rural people. It is described as "especially necessary" in the countryside, as long as a certain amount of propaganda has been carried out. The 1990 "Report" tells officials "to carefully adopt the long-term pregnancy [control] method of giving those with one child the coil, and sterilising [jiez] those with two." Most documents refer to the primary obligation to use propaganda to encourage adherence to the regulations, but imply that this is only an initial or preparatory stage, of which the duration is at the discretion of local officials. No documents anywhere forbid compulsory abortions or compulsory sterilisations.

The regulations on the quota system describe a strict assessment procedure for officials responsible for birth control, and threaten them with dismissal if the number of births in their area goes above a specified level. In addition senior officials have to sign a contract and pay a forfeit each year when the quotas are set by the higher authorities. Very high rewards are promised for officials in areas where the quota levels are nearly met. The Ganze authorities make it easier for officials in Ganze to gain these awards than their counterparts in other parts of Sichuan, and make it less likely that they will be dismissed, but this was probably not to lessen the but because it was impossible to meet the quotas in the mountainous and nomadic areas. More significantly, the four quotas by which each official is assessed is increased in the 1991 Ganze regulations to six quotas, which include the number of "contraceptive operations" carried out. There is no quota for the distribution of contraceptives other than abortion and sterilisation.

"The Planned Birth Procedure of the Ganze Tibetan Autonomous Prefecture" [Chinese text]..... 8

3. The Decision of the Standing Committee of the People's Congress of the Ganze Tibet Autonomous Prefecture on the Implementation of "The Procedure" [Tibetan text] ..... 9

4. The Procedure [banfa] for Birth Control in the Ganze Tibetan Autonomous Prefecture [pp11-34 are

5. Some Explanations for the Problems Arising from the Implementation of "The Procedure" by the Ganze Tibet Autonomous Prefecture Planned Birth Committee..... 43

6. The Joint Announcement by the Ganze Tibetan Prefecture Office of the Central Communist [Party] Committee and the Ganze Prefecture People's Government Office on Carefully Carrying Out "The Procedure". Ganze Committee Document No.48 (1989)..... 51

7. The Announcement on the Temporary Regulations on the Treatment of CPC Members, League Members, State Cadres and State Employees who Violate the Rules in the "Procedure". Ganze Committee Document No.31 (1991) [Tibetan text pp53-73, Chinese text pp74-80]..... 53

8. The Announcement by the Sichuan Provincial People's Government on the Implementation of the Responsibility System for the Planned Birth Target

9. The Announcement by the [Sichuan] Provincial Committee of the Chinese Communist Party [CPC] and the Sichuan Provincial People's Government on the Approval and Distribution of the "Report On Further Strengthening the Work of Planned Birth" by the [Sichuan] Provincial Planned Birth Leading Group. Sichuan Committee Document No.26 (1990) [Chinese text]..... 85

10. The Ganze Prefecture People's Government's Announcement on the Implementation of the Responsibility System for [Attaining] the Planned Birth Target. Ganze Government Document No.1 (1989) [Chinese text]..... 94

11. The Joint Announcement by the Ganze Tibetan Prefecture Office of the Central Communist Party Committee and the Ganze Prefecture People's Government on How to [Further] Improve the Responsibility System for [Attaining] the Planned Birth Target [1991] ..... 97

[pages 1-7]

[Sichuan Provincial CPC reprint of a Communist Party Central Committee Document, issued on 12 May 1991]

# 1. The Decision of the State Council [and] the Communist Party Central Committee on How to Strengthen the Work of Planned Birth and Strictly Control Population Growth

Communist [Party] Central Committee Document No.9 (1991)

(12 May 1991)

In "The Overall Structure of the Ten-Year Plan and the Eighth Five-Year Plan for the Development of the State National Economy and the Social Development of the PRC", it states that: "An effort must be made to control the rate of natural population growth over the next decade to stay within 12.5%". The realisation of this planned target for controlling population growth has important significance in guaranteeing the second and third steps of the strategic goal of modernising our country. Therefore the following has been decided:

## 1) We Must Unify Understanding and Strengthen Leadership in Planned Birth Work.

The strict control of population growth is an important and pressing task that we are facing. We have the largest population among the developing countries. A large population, limited amount of arable land, a poor basis for development [ie, poor infrastructure] and insufficient resources for the number of people: this is our basic state of affairs.

Although we have rich resources in manpower, which is an important condition for the building of socialism, overly rapid population growth is a heavy burden to us. It has severely inhibited the progress of economic and social development in our country. We have made planned birth, control of population growth and the

improvement of the quality of population long-term basic state policies.

These are important strategic decisions, made in consideration of the immediate interests of the people and the reality of our country, [to allow] the country to prosper quickly and the people to get richer quickly. In the last twenty years, especially since the Third Session of the Party's 11th Central Committee, through common effort by the whole Party, the whole country, and planned birth workers, we have realised a huge achievement recognised all over the world on the issue of population control.

The birth rate has decreased from 33.43% in 1970 to 21.06% in 1990. However, we must also realise that the population situation in our country is still very severe and the task of population control is still very difficult. At present, the total population in our country has already reached 1.1 billion. For the last several years, the population has increased each year by more than 16 million, which is equivalent to the population of a medium-sized country. This [increase] has imposed tremendous pressure and difficulties on the state's economic reconstruction, social development and the improvement of the people's quality of life.

The 1990s are a crucial period in the historical process of socialist modernisation in our country, [and] it is also a key period for the control of population growth. In



particular, during the eighth five year plan, just as the birth-rate happens to be at its peak, planned birth seems especially urgent. If we cannot effectively control the population growth, it will directly affect the realisation of our strategic target of modernisation, the further improvement of the people's living standards and the quality of the whole nation.

Population growth will also speed up the consumption of natural resources, harm the natural environment and adversely affect later generations. From this we can see that planned birth is a major issue relating to the strategic objective of modernising our country. [Its] significance is relevant to the whole nation's rise and fall and already requires urgent attention. Without full attention there is no possibility of progress. Therefore, we must have a high level of historical responsibility and a sense of urgency.

Each level of Party committee and government must put planned birth on a par with economic reconstruction, and incorporate a population plan into the general planning of the local and national economic and social agenda as an important item. The senior leader of the Party and government must personally undertake this task and take responsibility for it.

Every level of Party committee and government must establish a population and planned birth leading group with strong leaders as group leaders, in order to organise and coordinate all relevant departments to do the planned birth work well.

Every level of Party committee and government must shoulder the responsibility of completing the local area population plan, and implement and improve the responsibility system for planned birth. We must make the successful completion of planned birth and of population planning an important test in examining the achievements of each level of Party committee, government and its leaders and cadres.

Scientific examination standards and supervising methods must be set to [achieve] this effect. Every level of Party committee and government must strengthen its supervision and examination of the implementation of the birth plans of their subordinate Party committees and governments, in order to secure the accuracy of the statistics, and [they must] forbid false reports. A system of rewards and punishments must be established to honour those who do the work well, to punish those who cause the population to get out of control, and to question the leaders responsible.

## **2) [We Must] Strictly Carry Out and Realise the Present Policy, and Manage Planned Birth According to the Law.**

The current planned birth policy in our country is: to advocate late marriage and late childbirth; to give birth to few but healthy children; and to propose that a couple have only one child. State cadres, state employees and township resident couples can have only one child except for those who have special permission to have a second one. In the countryside it must also be advocated that each couple has only one child. If some of the masses have a real problem, they can have a second child after an interval of a few years.

In order to raise the economic and cultural standards and nationality quality in the minority areas, planned birth must also be implemented among minorities; the specific demands and practices are to be decided by each local autonomous region or province. This policy is for the basic benefit of people all over the country, and has gradually gained the understanding and support of the masses of people through many years of work.

Right now, in order to uphold the current policy's stability and continuity, we must adhere strictly to its implementation and there must be no vacillation, weakness or deviation. We must strictly strengthen [the] planned management of the population according to state laws and relevant regulations. The population birth plan of the basic work units must be announced in order for the masses to read it and to allow the work units to receive their criticism.

We must firmly redress the situation in places where planned birth work has slackened; there must be no loopholes, no random approval of birth quotas. We must strictly forbid early marriage, early births, and large families. We must also make an effort to prevent unplanned pregnancy and unplanned births.

We must manage planned birth strictly according to the law. The local legislative rules concerning planned birth made by each province, autonomous region and municipality are the legal basis upon which the local planned birth administrative departments implement their tasks. They are also the basis on which the People's Court tries court cases. We must strongly advocate and strictly carry out the above-mentioned planned birth rules. We must also carefully lay down all the associated rules and regulations and bring planned birth further into the framework of the legal system.

Communist Party members, league members, revolutionary soldiers and state cadres, especially the top leaders of each level, must take the lead in observing and implementing the planned birth policy and relevant rules. They must do the work well for their sons and daughters, as well as for [their] relatives. They must actively propagandise amongst the masses. The Party's Departments of Discipline and Government Supervision must severely treat those who violate planned birth policy and rules.

## **3. [We Must] Seize Its Central Characteristics and Undertake Planned Birth Work More Steadfastly and Conscientiously.**

In order to strictly control population growth, we must put our emphasis on the basic work units, especially the masses in the countryside. For a long time, the emphasis of planned birth work will be in the countryside, and it is also there that the problem lies. Therefore leaders at every level must make a priority of using more energy to undertake conscientiously planned birth work in the countryside.

The key to doing planned birth well in the basic units is for each branch of the Party committee of the basic work unit to shoulder responsibility. They must sufficiently rely on models and pioneers of the cadres and Party members, sufficiently elaborate the functions



of other organisations at the basic level, widely mobilise and rely on the masses, and implement the responsibility system on population and planned birth objectives.

In order to build a planned birth work-force with a good ideology, good style, professionalism and management skills, we must also organise teams of planned birth activists and rely on them to do regular planned birth work well. The planned birth association is a good form of organisation that assists the government and mobilises the masses of people to participate in planned birth work; each level of Party committee and government should actively support it in order to improve the function of organising the masses for self-education, self-management and self service.

The practice of planned birth is a hard task that requires care and concerns thousands of families. Leaders at all levels must actively, carefully, patiently and solidly do this kind of work well. They must continue to carry out their policy with its emphasis on education and propaganda, contraception, and regular work. They must work gradually for the goal of regularising, making more scientific and institutionalising the practice of planned birth.

They must widely and consistently carry out long-term propaganda education on basic state affairs and basic state policy on planned birth. This is in order to realise the aim of popularising basic knowledge of population and planned birth in the cities and villages throughout the country within two or three years and to strengthen population awareness and the idea of healthy [births]. They must popularise amongst people of child-bearing age the scientific and technological knowledge of contraception, planned birth and eugenics, and must offer them high quality technical contraceptive services which are safe, effective, economical and simple.

They must combine propaganda education with solving the actual problems, take care of the masses, and take more actual action in order to achieve the understanding and support of the masses and turn planned birth into conscious action among the masses of people. They must both effectively control population growth and improve the relationships between the Party and the masses, and the cadres and the masses, and preserve the situation of stability and solidarity.

#### **4. [We Must] All Work Together in Order to Guarantee the Smooth Development of the Planned Birth Task.**

Implementing the planned birth policy is a huge social project, and every area of society must pay attention to and support this task. Every relevant department and people's organisation must draft adequate procedures according to their own [level of] responsibility, under the unifying leadership of the Party committee and government and under the supervision of the People's Congress.

Each department must make policies and rules concerning social welfare, employment and aspects helpful in encouraging late marriage, late births, and fewer and healthier births. Marriage registration work must be strengthened and illegal marriages must be

strictly forbidden. Effective methods must be adopted to control the mobile population's births.

Work for the welfare of women and infants as well as for quality births, upbringing and education must be done well. Helping the poor [*lupin*] must be closely combined with planned birth in the countryside. We must strongly advocate the work of social welfare and social security in the countryside, must realise the policy of "five securities", and must respect the elderly and develop the policy of providing insurance for [them] [*laonian baoxian*].

We must strengthen scientific research and technical aid for planned birth work. Trade unions, the Youth League and the women's federation etc. must exercise their functions as mass organisations strongly enough to participate actively in planned birth work.

Each level of Party committee propaganda department must actively organise and co-ordinate the relevant departments of broadcasting, film and television, the press, education, culture and publishing as well as other sectors of society in order to implement successfully the work of intensive and widespread propaganda on population and planned birth.

Each level of Party, cadre and league school as well as each type of senior and middle school must all include, as part of the curriculum, education on population and planned birth. [In addition] planned birth must be included in the assessment of "civilised work units", and those [units] whose planned birth quotas do not reach designated quotas cannot be established as civilised work units.

In order to implement planned birth policy better, each level of Party committee and government must be determined to offer the necessary capital and material guarantees. During the eighth five year plan, current expenditures on planned birth at each level of finance must be increased from 1 yuan per person per year to 2 yuan, special funds must be used for special purposes, and basic work units should be the area of emphasis. Poor and minority areas need more help. The basic necessities for planned birth must be included in the plan for basic construction at each level of government, and necessary funds must be allocated.

The organisational structure of each level of planned birth department must be strengthened. Capable cadres must be chosen to enlarge the planned birth troop. Each local area must more quickly establish planned birth service networks among counties, villages and towns. Each level of Party committee and government must pay attention to and take care of planned birth cadres and strengthen their training, support their work and help them to solve actual problems.

Each level of Party committee and government must carefully carry out this decision, and implement planned birth policy well and with care. The entire Party and people throughout the country must be mobilised to carry out strictly and carefully the basic state policy of planned birth for a long time, to make the Chinese nation prosperous and future generations happier. We must all work hard to achieve control over the growth in [the

number of] births, and to promote the economy and the development of society.

Theme word: planned birth  
**CPC Sichuan Provincial Office**  
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[page 8 only]

**[2] Decision by the Standing Committee of the Sichuan Provincial People's Congress to approve "The Procedure for Planned Birth in Ganze Tibetan Autonomous Prefecture" [henceforth "The Procedure"] - passed on the ninth meeting of the seventh session of the Standing Committee of the Sichuan Provincial People's Congress on 8 May 1989.**

The ninth meeting of the seventh session of the Standing Committee of the Sichuan Provincial People's Congress decided to approve "The Procedure". It is to be

announced and implemented by the Standing Committee of the Ganze Tibet Autonomous Prefecture People's Congress [Ganze PPC].

[page 10 only]

**[3] The Decision of the Standing Committee of the Ganze Provincial People's Congress on the Implementation of "The Procedure" Passed at the First Meeting of The Sixth Session of the Standing Committee of the Ganze Provincial People's Congress on 28 June 1989.**

"The Procedure" is approved by the ninth meeting of the seventh session of the Standing Committee of the

Sichuan Provincial People's Congress [the Sichuan PPC]. It is to be implemented from July 1 1989.

[pages 35-42]

**[4] The Procedure [*banfa*] for Birth Control in the Ganze Tibetan Autonomous Prefecture**  
[for translation of the "Procedure" see TIN Doc. 13(XB)]

[pages 43-50]

[Ganze Tibetan Prefecture Planned Birth Committee, 20 July 1989]

**[5] Some Suggestions on Problems Arising from the Detailed Implementation of the "Ganze Tibetan Autonomous Prefecture Planned Birth Procedures" by the Ganze Tibetan Autonomous Prefecture Planned Birth Committee.**

The "Ganze Tibetan Autonomous Prefecture Planned Birth Procedures" (henceforth "The Procedures") were examined and approved by the 27th meeting of the Standing Committee of the Ganze Tibetan Prefecture People's Congress on 24 June 1988; the ninth meeting of the Standing Committee of the seventh session of the Sichuan Provincial People's Congress held on 8 May 1989 has approved it for implementation on 1 July 1989. The following explanations were given according to rule 29 of "The Procedures":

### **1. On the Question of Controlling the Excessive Population Growth**

In view of the situation in our prefecture and the difficult problem of planned birth, "The Procedures" further confirmed that from an ideological point of view, we must make sure that population growth is in line with the economic and social development plan; it must be in accordance with resource use, environmental protection and environmental balance.

The basic spirit and the main task of "The Procedures" [is] to implement planned birth, to control population numbers, to raise the quality of the population, to strictly

control the excessive growth of the population, and to do the work of planned birth work well and efficiently in the spirit of developing the growth of the population according to the plan.

The rule to continue to advocate and encourage a couple only to give birth to one child is an important strategic method adopted for the purpose of stabilising the present birth policy and guaranteeing the realisation of the birth target for the year 2000.

The general rules of the 'Procedure' set out that 'ideological education must be the main method in implementing planned birth, and it must also be assisted by necessary administrative and economic methods'. This is an important principle to be understood. We must always continue to carry out the policy of the 'three fors' [*san wei*]; we must always put ideological propaganda first; we must promote a change in [the way] people [think] of birth and further strengthen the consciousness of practising planned birth.

## 2. On the Question of Strengthening Leadership and Establishing a Working Responsibility System *[gongzuo zeren zhi]*

Article No.4 of the 'Procedure' says: "Each level of People's Government in the prefecture must strengthen leadership in planned birth work"; "Each work unit must practice the planned birth working responsibility system *[gongzuo zeren zhi]* and each department must exercise its own responsibility according to its division"; "The villagers' committee in the countryside and the nomadic areas and the neighbourhood committees in the urban areas must all establish the relevant system".

This demands that the prefecture, county, district and village (town) people's governments must all put planned birth work onto an important agenda and include it in general planning. They must be sure to strengthen leadership, stick to 'grasp[ing] two kinds of production *[zhua lianzhong shengcan]*', and the primarily responsible leaders must be personally involved.

Each level of work unit must fully establish its target management responsibility system *[mubiaoguanli zerenzhi]* and its planned birth work responsibility system which interlocks with the "Construction of the Two Civilisations" and combines "responsibility, rights and interests" *[ze, quan, li]*. [The] village and neighbourhood leadership must also make planned birth an important part of the construction of the "Two Civilisations".

Each relevant department, including propaganda, health, finance, planning, law, public security, industry and commerce, education, news, broadcasting and television, religion and planned birth, etc., [and] mass organisations such as trade unions, the youth league and the women's federation must all unite as before. Thus they can help each other sufficiently to elaborate on each other's specialities in a common effort carefully to carry out and implement 'the Procedure' and to do planned birth work well.

## 3. On Restricting Birth

'The Procedure' uses the form of law and legal rules to give an accurate and complete representation of planned birth policy. We must continue to 'advocate and encourage late marriage and late childbearing', [and] 'advocate and encourage a couple only to give birth to one child'. It is forbidden to give birth to many children, to have unplanned births and to have illegitimate births.

### - Late marriage and late childbearing:

The 'Procedure' states that a marriage of a man and woman, both of whom are three years older than the legal marriage age according to the PRC marriage law, is a late marriage. That is, if both [members of the couple] are of the Han nationality and the man is 25 and the woman is 23, it is a late marriage. In the case of members of a minority nationality and Hans who marry a minority person, where their marriage age is three years older than the legal marriage age, namely the man is 23 and the woman is 21, according to the Supplementary Rules of the Marriage Law of the PRC this is a late marriage.

The following constitutes late childbearing: when a Han woman is 24 [when she gives birth], [when a minority woman gives birth when she is 22, and when a Han woman married to a minority man gives birth when she is 22 - translator's note].

### - Births must take place according to the plan:

Those who are covered by the rules of the 'Procedure' and who are allowed to give birth, no matter whether it is the first, second or third [child], can be included in the planning after [submitting an] application by both the wife and the husband. Those who have not applied and were not approved must not get pregnant and give birth, otherwise [the proposed birth] will be seen as out-of-plan pregnancy and child-bearing.

"Illegitimate birth" refers to child-bearing by couples illegally living together who have not registered for marriage.

- Han workers who work over 8 years in high, cold and remote areas and Han residents of such places who have held formal residential certificates for over 8 years can give birth to second children upon approval. It must be noted that both members of the couple must reach the 8-year limit.

- In the sentence 'The first child has a non-hereditary disease and cannot grow up to do normal labour', the two aspects, non-hereditary disease and inability to grow up to do normal labour, must be emphasised. The 'Draft Standard Examination of III and Disabled Children Among Single Children in Sichuan Province', 'The Corrected [Version] of the Draft Standard Examination of III and Disabled Children Among Single Children in Sichuan Province' And 'Temporary Rules on the Examination And Management of III and Disabled Children Among Single Children in Sichuan Province' must be strictly followed.

- A single child who marries a single child or one member of a couple whose family for more than two generations [has consisted of] single children can have a second child subject to approval. Being the only man or woman among brothers and sisters or [amongst] adopted children cannot be regarded as a being a single child; what is meant for a couple by 'a single child for two generations and above', is that there is only one son or daughter for over two generations.

- The following sentence: 'disabled soldier whose disability [is] rated above grade A, class 2', or one [member] of the couple was injured and the disability rated equal to that of grade A class 2 of the soldiers', refers to those disabled soldiers with a certificate of disability rated grade A, class 2, who fit within one of the circumstances regulated in Article 3 of 'The Temporary Regulations for Welfare Benefits and Favourable Treatment for Revolutionary Soldiers' approved and forwarded [or promulgated] by the Central People's Government Political Affairs Office on 25 December 1950.

[The phrase] 'or one [member] of the couple ... because of public work' [means a situation where] one [member] of a couple was disabled due to lawful activities such as rescuing state and collective public property, saving



other people's lives and property, and fighting against evildoers or evil deeds, etc. Their disability degree above grade A, class 2 of disabled soldiers must be examined by hospitals above the county level and by the People's Government above the village level [*xiang*].

- The calculation of the numbers of sons and daughters of couples in a second marriage (arising from the death of a spouse or divorce), including legal adoption, adopting from relatives and their own child-bearing, is as follows:

'One side having no children' means [the situation where] couples who are either newly married, already married but have not yet had a baby, or have already had a baby but the child has died. According to Article 29 of the Marriage Law of the PRC, the relationship of the parents to the sons and daughters does not disappear with the parents' divorce. No matter who takes care of the children after the divorce, the children are still the parents' children. Those whose children are not [living] with them cannot be seen as having no children. Whether or not the couple in the second marriage has another child must be determined by the number of children from the previous marriages of the two [people], not by the number of children in the newly-formed family.

#### - The birth interval period:

The interval for cadres and workers working in government offices, industries and enterprises, urban residents, market gardeners and Han nationality peasants must be over three years. This means the next child-bearing can only be allowed after the last child is three years old. The interval for minority nationality peasant women and women who first gave birth at over 28 [years of age] can be shortened to two years. Still, it must be insisted that they be included in the planning until after the child is over two years old.

#### 4. Quality birth and childbearing and planned birth methods

No.12 of the 'Procedure' provides that 'a health examination must be carried out before marriage'. It demands that this practice be tested in medical units and work units spreading planned birth propaganda and technical guidance, under good conditions. It must be practiced according to the spirit of the joint announcement by the Health Department and the People's Affairs Department [*minzhengbu*].

No.13 provides that 'it should be advocated that one [partner] in couples who are cadres, workers, urban residents, market gardeners, Han peasants with two children and minority nationality peasants and nomads with three children should adopt the method of sterilisation'. This is an important, effective technical method for controlling multiple births. It is especially necessary in the agricultural and nomadic areas where contraceptive and planned birth knowledge is not popularised enough and the practice of giving contraceptive pills and equipment cannot continue. However, sufficient propaganda and mobilisation work must be carried out along with this method. We must give the masses options to choose from.

We must especially emphasise sterilisation for those women who cannot get married yet consistently have illegitimate births. Those who are really unfit for sterilisation must use drugs or other effective methods of contraception. Taking precautions before pregnancy occurs must be done well.

#### 5. The Question of Encouragement and Punishment.

The late marriage leave and late birth leave provided for in "The Procedures" should be added on to the basic marriage leave and birth leave laid down by the state. Those [couples] who enjoy late marriage leave must both [husband and wife] fulfil the conditions of late marriage. Those who enjoy late birth leave must be women whose first birth fulfils late birth conditions.

The welfare fee for the single child is 6 yuan for a boy and 8 yuan for a girl. Fifty percent should be paid by each of the parents' work units. The problem of single child welfare fees for couples who have single child certificates and who lose one spouse or get divorced will be discussed and solved by the work units of the deceased and the survivor. (It can either be paid by the work unit of the surviving Party in total or continue to be paid half and half by the work units of both [parties].)

Those who remarry must have their single child certificates taken away and their single child benefits must be stopped. The amount already given will not be taken back. Those who divorce must have their single child certificate taken away and their single child benefits stopped. The amount [already] given will not be taken back.

The welfare fee for the single child of an urban individual entrepreneur will be dealt with according to the document entitled "Ideas on the Management of Individual Entrepreneur Planned Birth" (Document No.161 of the State Planned Birth Committee 1987) issued jointly on 29 June 1987 by the State Planned Birth Committee, State Industry and Commerce Administrative Management Bureau and the China Individual Labourers' Association.

Those who do not accept advice and who violate the rules in "The Procedures" and produce an extra baby, namely, violating Article 8 of "The Procedures" to give birth to a third child, or violating Article 9 to give birth to a fourth child, will each be charged an extra birth penalty fee for seven years at the rate of 15%-20% of their salary or annual income.

The total amount "no less than 900 yuan" refers to the lowest amount of money to be levied separately on each [member] of the couple. It does not mean the total amount levied on the couple.

"Extra-plan pregnancy" means a pregnancy that does not comply with the birth interval as regulated in "The Procedures". Each month an extra-plan pregnancy fee of 15 yuan is to be levied on each [member] of the couple.

Those who give birth without reaching the legal marriage age will be charged 25 yuan each every month from the date of the birth.



[An] "illegitimate birth" means a child produced by those men and women who do not form families. A one-off 1,000 yuan illegitimacy penalty fee will be levied on the couple. The man should pay at least 600 yuan.

Those whose formal residential certificates are for not more than 8 years and who give birth to a second child will have 10 yuan each month levied on each [member] of the couple from the date of the birth of the child to the time when the child is 8 years and 9 months old.

Cadres, workers and urban resident couples who comply with the regulations of the planned birth interval but give birth without approval will have a 100 yuan penalty fee levied on each parent; if they are peasants and herdsmen the amount is 50 yuan each.

After receiving a single child certificate, those who insist on giving birth to a second child without examination and approval must be treated as having had an extra birth according to Article 21 of "The Procedures", in order to preserve the severity of the policy.

Cadres and workers who have extra children, besides being dealt with by Articles 21, 22 and 23, must also have both salaries cut by one grade. None of these [offenders] should be named as an advanced worker within five years, none should get a promotion, none should receive subsidies for difficulties [hardship payments etc.], and all must pay their own medical expenses during pregnancy and birth, and [will] have their salary stopped during post-natal leave.

#### The Calculation and Collection of Extra-Birth Fees

For those who are paid a salary, these will be calculated according to the total amount of the normal monthly salary, namely: basic professional salary, regional subsidy, working year salary [*gongling gongzi*] and mobile salary [*fudong gongzi*] during the year of the birth of the child; and will be levied for seven years.

In the case of the agricultural and nomadic population, when there are problems calculating by families, they can be assessed by the average income of the village (counting each individual). The total amount for the wife and husband should not be lower than 900 yuan each.

[pages 51-52]

#### [6] Announcement by the Office of Ganze Prefecture Party Committee and Ganze Prefecture People's Government Office on Carefully Carrying out the "Procedure for Planned Birth in Ganze Prefecture".

Ganze Party Committee Office Document No.48 (1989)

To: County CPC Committees, County People's Governments, and Prefecture level Departments:

"The Procedure" has been approved by the ninth meeting of the seventh session of the Standing Committee of the People's Congress of Sichuan Province. The decision made at the first meeting of the sixth session of the Standing Committee of the Prefecture's People's Congress is [now] proclaimed for implementation.

The method of collection: the fees can be charged all at once or in instalments (over a maximum of 3 years). If extra births continue, for every extra birth there will be an addition of 10% extra birth fees on the previous payment (for example: if the last extra-birth fee was calculated at 15%, the next one must be 25%).

All the money collected in penalty fees - including extra birth fees, unplanned pregnancy fees, childbearing fees and illegitimate birth fees - may only be used on family planning. The management and use of this money must be carried out according to the planned birth extra birth penalty fee management procedure of Sichuan Province (namely: Sichuan Provincial Document No.016 (88) of the Provincial Planned Birth Committee).

#### Treatment for Accidents During Planned Birth Operations

Strictly carry out the spirit of the State Council's announcement, "Procedure of Treatment for Accidents Which Occur During Operations", printed by the Sichuan Provincial Planned Birth Committee (Sichuan Planned Birth Committee Document No.012 (87)).

The basic-unit planned birth apparatus is the planned birth leading group office of each work unit at different levels in the villages (and towns).

The "higher planned birth department" refers to the county planned birth committee.

Any outstanding problems which arose before the introduction of "The Procedures" are still to be dealt with by each county according to its former regulations.

The whole prefecture must carefully carry out the rules in "The Procedures" from the date of [their] implementation. No one should follow their own way and start a new method.

Ganze Tibetan Prefecture Planned Birth Committee

20 July 1989

The implementation of "The Procedure" marks [the fact] that planned birth work in our region has taken a further step from relying mainly on administrative management towards a legal framework.

This has not only provided cadres and masses with a common set of regulations and a legal framework regarding planned birth. It is also of great significance for [the tasks of] further controlling the overly fast growth

of the prefecture's population, and raising the standard of population quality, as well as enabling population growth to be in accordance with economic and social development. It must be thoroughly and carefully implemented.

1. Each county and work unit must treat carrying out "The Procedure" as an important task. They must also act in the spirit of The Fourth Plenum of the Thirteenth Party Central Committee - i.e. to study diligently, widely promote and resolutely implement it.

A certain time in August and September must be devoted solely to carefully studying, widely propagating and carrying out "The Procedure". We must further unify ideological awareness, constantly strengthen legal consciousness, raise the [people's] consciousness of practicing planned birth and secure the fulfilment of the population control plan in our prefecture.

2. We must upgrade existing planned birth policy so that it conforms to the rules in "The Procedure".

"The Procedure" in fact draws on the experience of implementing planned birth over the last few years. It perfects the former administrative rules and enshrines them in the form of local regulations. Each county must act as quickly as possible to carry out an examination of the planned birth situation. All activities that do not comply with "The Procedure" must be stopped. Those issues that have been dealt with, according to former regulations, before the implementation of "The Procedure" will not be affected.

3. As for determining [which areas are classified as] high, cold mountainous border regions, State Council Document No.064 (1983), published by the Labour Personnel Section Bureau of the Labour Ministry, all 18 counties in our prefecture come within the scope of the "high, cold mountainous border areas" category.

4. We must strengthen the management of planned birth among the floating population. Each county must get public security, industry and commerce, planned birth, urban reconstruction, taxation, village and township industry and individual labourers' associations departments etc. to form management groups to draft management methods. All should take control and manage [them properly].

5. Each relevant work unit must practice the planned birth work responsibility system. The following departments must all act according to their specific responsibilities: planned birth, health, education, and economic planning committees; people's administration [*minzheng*], legal, public security, finance, personnel, broadcasting, cultural, industry and commerce; propaganda departments, and trade unions, Youth League, and women's associations etc..

6. Each level of Party committee and government must strengthen its leadership over publicising and implementing "The Procedure", must include this article in their overall work agenda and make it into a reality.

We must strictly and determinedly promote and perfect the planned birth target management responsibility system [*lijihua shengyu mubiao guanli zerenzhi*], strengthen the building of departments with a planned birth function, and guarantee the required expenses and planned birth operation fees where finances permit.

Where there is a lack of specialised personnel this must be immediately made up, we must ensure that planned birth groups are stable, look after their living standards and support their work. All people's organisations must be mobilised and organised to closely cooperate with each other in a common effort to propagate and carry out "The Procedure".

**The Office of Ganze Prefecture Party Committee  
The Office of Ganze Prefecture People's Government  
17 August 1989**

[pages 74-75]

[Ganze Prefecture CPC Committee and Ganze Prefecture People's Government, 4 July 1991]

Confidential

## **[7] Announcement on Temporary Regulations on the Treatment of CPC Members, Youth League Members, State Cadres and State Workers who Violate the Ganze Prefecture Planned Birth Procedure Published by the Ganze Prefecture CPC Committee and Ganze Prefecture People's Government**

**CPC Ganze Prefecture Committee Document No.31 (1991)**

Each county committee, county people's government, departments at the level of prefecture, provincial enterprises above the county level:

We hereby pass on to you the announcement on temporary regulations on the treatment of CPC members, Youth League members, state cadres and state workers who violate the Ganze Prefecture Planned Birth Procedure set out by the CPC Ganze Prefecture Committee and the Ganze Prefecture People's Government.

This has been drafted by the Prefecture Disciplinary Committee, Prefecture Committee Organisational Department, Prefecture Personnel Bureau, Prefecture Bureau of Supervision, Prefecture Bureau of Labour, Prefecture Committee of the Youth League and the Prefecture Committee of Planned Birth. Please ensure you carry it out.

It is a long-term basic state policy of our country to apply planned birth, to control population growth and to

raise population quality. It is an important matter which affects whether or not the strategic targets of building modernisation in our country can be realised and whether the nation will flourish.

Recently the Central Committee and the State Council drafted the "decision on strengthening planned birth work and strictly controlling population growth". Following the spirit of the "decision" of the Central Committee, we must further implement the details of the "Ganze Planned Birth Procedure". We must strengthen planned birth management for CPC members, Youth League members, state cadres and workers.

[pages 76-81]  
[Printed 4 July 1991]

## **[7] Temporary Regulations on Treatment of CPC Members, Youth League Members, State Cadres and Workers Who Violate the Ganze Prefecture Planned Birth Procedure**

Article 1. In order to "resolutely put into practice the basic national policy of planned birth and control the overly fast growth of the population", and to guarantee the planned development of the population and economy in our prefecture, this rule was drawn up on the basis of the actual situation in our prefecture and the "Planned Birth Procedure of the Ganze Prefecture" [henceforth abbreviated to "The Procedure"], and the relevant regulations of the Party, the administration and the Youth League.

Article 2. Whoever violates "The Procedure" will, apart from being dealt with according to the relevant regulations in "The Procedure" and the suggestions [by the Prefecture Planned Birth Committee for implementing "The Procedure"], will also be subject to disciplinary action by the Party, the Youth League and other organisations according to their regulations.

Article 3. Communist members who violate "The Procedure" and do not practice planned birth will be given disciplinary warnings or serious disciplinary warnings; candidate Party members will have their formal membership delayed; Youth League members will be given disciplinary warnings or serious disciplinary warnings; and state cadres and workers will be subject to administrative disciplinary measures or punishment by registration of the mistake on file [jiguo]. Persons who have not formally been given any professional titles will have their confirmation of professional titles delayed.

Article 4. Those who violate "The Procedure" and have one extra birth or have a child outside marriage will be dealt with as follows:

Communist members will be dismissed from all positions held within the Party; candidate Party members will have their qualifications for preliminary Party membership removed; Youth League members will be dismissed from all positions held within the Youth League; state cadres and workers will be dismissed from their positions or awarded more serious punishments; persons who have not formally been given any professional titles will have their initial training stopped; and contract cadres, community teachers, temporary teachers and part-time

It is very important to control their behaviour systematically to prevent breaches of planned birth policy. Each level of Party committee and government must be sure to strengthen leadership, do propaganda work well, and unify ideological awareness to enable planned birth work in our prefecture to develop in a healthy way.

**CPC Ganze Prefecture Committee  
Ganze Prefecture People's Government  
4 July 1991**

cadres in the countryside will be dismissed from their jobs.

Article 5. Those who violate "The Procedure" and have two or more extra births will be dealt with as follows:

Communist members will be expelled from the Party, Youth League members will be expelled from the Youth League; state cadres and workers will lose the chance to be kept on under surveillance, and those whose circumstances are particularly bad and whose case has had a bad influence will be punished by losing their public position, i.e. losing all chance of public employment.

Article 6. Those who violate "The Procedure" and have children before the legal marriage age, who encourage or force their children or others to give birth before the marriage age, will be dealt with as follows:

Communist Party members will be given at least a serious disciplinary warning within the Party; Youth League members will be given a serious disciplinary warning or more serious punishment within the Youth League; and state cadres and workers will have their punishment recorded in their file or more serious punishment.

Article 7. Those who adopt or plan to transfer babies to others without going through the appropriate procedure will be considered as having extra births, and will therefore be given relevant punishment within the Party, Youth League and administration as provided in Article 4 above.

Article 8. Those who violate "The Procedure" and drown or abandon babies will, apart from being dealt with by relevant rules in the law, be dealt with as follows:

Communist Party members will be expelled from Party membership; Youth League members will be expelled from Youth League membership; state cadres and workers will be expelled from state employment.

Article 9. Those who illegally obtain contraceptive coils for women of child-bearing age, produce false



certification for couples or carry out false operations, will be dealt with according to circumstances; communist Party members will be given serious disciplinary warnings or even expelled from the Party; Youth League members will be given disciplinary warnings or even expelled from Youth League; and state cadres and workers have the punishment record kept on file or even [may] be expelled from their public positions.

Article 10. Those who abet extra births by hiding or transferring pregnant women [who are not allowed to be pregnant according to the plan] will be dealt with as follows:

Communist Party members will be given serious disciplinary warnings within the Party or dismissed from their positions within the Party; Youth League members will be given serious disciplinary punishment within the Youth League or dismissed from their positions within the Youth League; and state cadres and workers will be given disciplinary warnings or be dismissed from their positions.

Article 11. Those who instigate or force their children or others to have extra births will be dealt with as follows:

Communist Party members will be given serious disciplinary warnings or dismissed from their positions within the Party; Youth League members will be given serious warnings or dismissed from their positions within the Youth League; and state cadres and workers will have their punishment record kept on their file or be expelled from their position.

Those who connive with and shield their children or others [who are] having extra births will be punished as follows:

Communist Party members will be given disciplinary warnings or serious disciplinary warnings within the Party; Youth League members will be given disciplinary warnings or serious disciplinary warnings inside the Youth League; and state cadres and workers will be given administrative warnings and have their serious punishment record kept on file.

Article 12. Those who violate "The Procedure" and ill-treat female infants or mothers of female infants will be dealt with according to the circumstances [as follows]:

Communist Party members will be given serious disciplinary warnings or disciplinary warnings within the Party, or dismissed from all positions held within the Party; Youth League members will be given serious disciplinary warnings within the Youth League or dismissed from all positions held within the Youth League; and state cadres and workers will have their serious punishment record kept on file or be dismissed from their positions.

Those who have caused serious damage will be dealt with as follows:

Communist Party members will be punished by staying in the Party under surveillance or even by expulsion from the Party; Youth League members will be punished by having their league membership withheld while their future behaviour is considered, or [being] dismissed from

the Youth League; and state cadres and workers will be punished by administrative dismissal and have their jobs withheld or be dismissed from their public posts.

Article 13. Those who violate "The Procedure" and attack, insult or strike planned birth officials and medical workers who are carrying out their work according to the law, or use other means to hinder the normal practice of planned birth, will be dealt with according to their positions [as follows]:

Communist Party members will receive serious disciplinary warnings within the Party or even the punishment of suspending Party membership while their future behaviour is reviewed; Youth League members will receive serious disciplinary warnings within the Youth League or even the punishment of suspending Youth League membership while their future behaviour is reviewed; and state cadres and workers will have serious punishments put on record in their files or even have their Party membership suspended while their future behaviour is reviewed.

Those whose circumstances are particularly bad and the consequences of whose actions are serious will be dealt with as follows:

Communist Party members will lose their Party membership, Youth League members will be given punishment of expulsion from the Youth League; and state cadres and workers will be dismissed from their state posts.

Article 14. Those who [use] graft, distribute in private [sifen] and embezzle the extra-birth penalties collected will be dealt with as follows:

Apart from being forced to return the amount taken within a limited time, the disciplinary punishments for Party members will be carried out according to the relevant articles in the "Draft of Relevant Rules of Punishment for CPC Members who Violate the Law and Disciplinary Rules on Economic Matters" issued by the Central Disciplinary Commission. The punishment will generally be more serious than the ones set out in the regulations above.

The punishment of Youth League members will be imposed in the light of the relevant rules set out in the disciplines of the Party and administration.

Administrative punishment for state cadres and workers is to be dealt with according to the "Temporary Rules of Administrative Department Personnel Guilty of Corruption or Bribery", issued by the State Council, and the relevant articles of the details of Implementation of Temporary Regulations on Administrative Punishment for State Administrative Office Personnel who are Guilty of Corruption or Bribery". Where there has been a violation of the criminal law, the crime will be investigated and responsibility established according to the law.

Article 15. Communist Party members, state cadres, workers and Youth League members involved in planned birth work [and] who neglect their duties and cause severe consequences will be dealt with as follows:



Communist Party members will be given serious administrative warnings within the Party or even dismissed from positions held inside the Party.

Youth league members will be given a serious administrative warning within the Youth League or even be dismissed from positions held inside the Youth League. State cadres and workers will have a serious misdemeanour entered on their record, or even lose their job.

Those who bend the law for friends and relatives, give favours etc., so causing serious consequences, will be punished as follows:

Communist Party members will stay in the Party under surveillance while their conduct is considered, or may even be dismissed from Party membership; Youth League members will stay in the Youth League under surveillance while their conduct is considered, or may even be dismissed from the Youth League; and state cadres and workers will stay in the administration while their conduct is considered, or possibly be openly expelled from their public posts.

Article 16. The responsible persons in a work unit who have not given the relevant treatment or punishment to people who have violated "The Procedure" according to "The Procedure" and this set of regulations, will be seen as having committed a serious dereliction of bureaucratic duty within the bureaucracy.

Those who have made this mistake who are Party members will receive relevant punishment as provided for in the Party's discipline [code] as laid down in the "Temporary Rules on Punishment for Party Members and Leading Cadres who have Committed Serious Mistakes through Dereliction of Bureaucratic Duty" issued by the Central Disciplinary Commission.

Those who are responsible persons in the Youth League will receive serious disciplinary warnings inside the Youth League; non-Party members will be criticised or even punished by recording their mistakes on file. Those who cause serious consequences will be dealt with seriously.

Article 17. All Party members, Youth League members, state cadres and workers who violate "The Procedure" - apart from being dealt with according to Articles 21, 22, [and] 23 of "The Procedure" and according to the suggestions by the Prefecture Planned Birth Committee on questions relating to the detailed implementation of "The Procedure", and the above-mentioned Party, Youth League and administrative punishments - will also receive the following punishments:

Within three years of having an extra birth, the parent cannot be elected in by-elections as Party or Youth League representative of the county or village; within five years he (she) cannot be elected as prefecture Party or Youth League representative or people's representative. Those who are Party and Youth League representatives or peoples' representatives will be disqualified. For three years their family members and relatives will be unable to have their rural residential registration certificates converted to urban ones.

Article 18. Where there are no regulations as to punishment for provisional Party members, persons who have not yet had their professional titles confirmed, employed cadres, community teachers, temporary teachers and part-time cadres in the countryside, [they] will be punished according to the articles of regulations relating to violations of discipline [*guidingweiji tiaokuan*]. Personnel who are commissioned or employed by state administrative offices and who do not comply with administrative punishment can be punished by expulsion and dismissal.

Article 19. Communist Party members and Youth League members from state administration and work units who violate "The Procedure" will, besides receiving punishment according to Party and Youth League discipline as set out in these regulations, also receive relevant administrative and legal disciplinary punishment.

Article 20. Where Communist Party members, Youth League members, state cadres and workers from Party, administrative or Youth League organs, industries or enterprises belonging to Ganze prefecture, contravene "The Procedure", their Party and Youth League base unit organisations as well as their superiors in the administration of their work unit should all give their opinions on how to handle the case. They should be reported to senior work units and departments to be dealt with within the limits of cadre management and the relevant regulations on the limits of approval of punishment through Party, administrative and Youth League disciplines. Where cadres are removed from their state posts, this must be reported to the Prefecture People's Government for approval.

Article 21. Party leaders and cadres who violate "The Procedure" who are dealt with by at least dismissal from all their positions within the Party, should generally at the same time be advised to leave all their external positions as well; as for those who, according to the regulations, ought to be punished by losing all their positions within the Party but who are actually without any position, they may be punished by being given a serious warning within the Party or allowed to remain in the Party on condition of future [good] behaviour. In the meantime it is suggested that they should lose all their external positions. Punishment for Youth League members will be based on Party discipline.

Article 22. This rule will be explained separately by the work unit which wrote this document.

Article 23. This rule will be implemented from 1 October 1991. Treatment awarded before October 1 will not be changed. Those who have not yet been dealt with will be treated according to this rule.

**CPC Ganze Prefecture Discipline Inspection Committee**  
**Ganze Prefecture Personnel Bureau**  
**Ganze Prefecture Supervision Bureau**  
**Ganze Prefecture Planned Birth Committee**  
**CPC Ganze Prefecture Organisation Department**  
**Ganze Prefecture Labour Bureau**  
**Youth League Ganze Prefecture Committee**

Theme words: Planned Birth, Rule, Announcement  
CPC Ganze Prefecture Committee Office  
Printed 4 July 1991

## [8] Sichuan Provincial People's Government Announcement on Planned Birth Work Target Management Responsibility System [*Jihua shengyu mubiao guanli zeren zhi*]

Sichuan Provincial People's Government Document No.206 (1988)

Attention: all city, prefecture and county people's governments, all district administrative offices and provincial government departments.

According to the instruction from the Central CPC Office and State Council Office on 26 July 1988 on the stabilisation of the present planned birth policy to strictly carry out the Sichuan "provincial planned birth articles", we must adopt strong measures to quickly and effectively carry out planned birth work, to control strictly the overly fast growth of the population in order to prevent the population of the whole province [from] exceeding 120,000,000 by the end of the century. The provincial government decided to implement the Planned Birth Target Management Responsibility System throughout the province from 1989, in order to increase the responsibility of each level of government to do planned birth work well.

### 1. The Targets and Responsibilities

In examining the political achievements of each level of government, we must take as important evidence [their effectiveness] in carrying out Sichuan's provincial planned birth rules and in fulfilling the "planned birth articles". We must include the population plan in the local general planning of the economic and social development of the region. We must implement the target responsibility system which applies rewards and punishments.

### 2. The Content of the Management Target

According to the population control target given by the state to our province, four items will be examined each year: numbers of births, the planned birth rate, the spread of two-children [families], and the extra-plan pregnancy rate. Hereby we issue the plan targets for 1989 and 1990, along with the targets by stages for the year 2000. The director and the vice director who are responsible are to sign separate planned birth work target management responsibility contracts with the mayors, special commissioners, prefecture directors and vice-mayors, vice-special commissioners and vice prefecture directors who have special responsibilities for planned birth.

### 3. Implementation

In examining annual performance the total number of points is 100. Those who do not exceed the controlled population number will get 30 points. Those who do not exceed the extra-plan pregnancy quota will get 30 points; those who do not exceed the quota for second children and fulfil the planned birth rate will get 20 points in each case. For every 1% lower than the target for number of births and extra-plan pregnancies, an extra point will be added. For every 0.1% higher than the target number of second children, one point will be

deducted. For every 1% more than the target for planned birth an extra point will be added. Each item in the quotas will be based on a random sample of 1,000 chosen by the Provincial Planned Birth Committee.

### 4. Awards and Punishments

1) Awards: 95 points will be the threshold for awards. After examination, those whose general marks are above 110 points will be placed in the first class, and awarded 1,500 yuan; those with points 100 and above will be [in the] second class, and awarded 1,000 yuan; 95 and over but less than 100 will be third class, and awarded 500 [yuan]; at 90-95 [points] there will be neither award nor punishments. Marks lower than 90 will be punished. Those who are awarded the first class award continuously for three years will be awarded the title of 'Red Flag Work Unit' and will receive a one-off prize. The necessary funds for such awards will be allocated from the planned birth fund.

The award units will be calculated according to a combination of the total population figure for the area and the number of counties (city and districts). Counties with a population of 500,000 will be an award work unit, those with less than 500,000 will be calculated according to the actual number of counties (cities and districts).

2) Punishments: those who, upon examination, did not fulfil the target will be criticised. Those who do not fulfil targets on examination for two years running will have a notice of criticism circulated and a written report will be sent to the provincial government. The responsibility for those who do not fulfil the target on examination for three years running will be held to be that of the chief leaders and the other leaders in charge of the task. Those who cause a serious loss of population control will be demoted one rank or one grade or even be dismissed completely from their positions.

Figures indicating the state of implementation of the plan will be announced each month - using the township or village, the unit - for the scrutiny of the masses. If the masses report any false reporting of figures then the Planned Birth Committee will investigate, together with the Statistics and Examination Departments. If this [error] is confirmed, any honorary title will be expunged, the award withdrawn, and the people responsible will be traced. These people will be treated under Article 3 of Article 8 of Document No.60 (1988) of the Sichuan government.

5. Practising population target management is a scientific management method created during the reform of family planning. Each level of people's government must carefully organise itself for it to be carefully implemented. Counties and every level of government below the county [level] should use the above-mentioned method, based on the actual situation, to implement the

Target Management Responsibility System level by level. They must all get together and resolve the emerging new situation and the new problems arising from the Target Management Procedure and constantly improve and perfect it.

**10 November 1988**  
Theme words: Planned Birth, Responsibility, System, Announcement

Planned Birth Office, Sichuan Province. Reprinted on 22 December 1988.

[pages 85-86]

### **[9] Announcement by the CPC Sichuan Provincial Committee and Sichuan Provincial People's Government on the Distribution of the Provincial Planned Birth Leading Group's "Report on Further Strengthening the Work of Planned Birth".**

**The CPC Sichuan Provincial Committee Document No.26 (1990),**  
Issued by the Sichuan Committee

To each people's government at the level of city, region, prefecture; each county, city, and prefecture committee; [and] each area administrative headquarters and provincial department:

The Provincial Committee and the Provincial Government agreed with the Provincial Planned Birth Leading Group's report on further strengthening planned birth work. We hereby refer it to you; please carefully study it and carry it out, taking your actual situation into account.

Birth control is a basic national policy of our county. It underlies the whole situation of economic and social development. At present and for some time to come the population situation in our province will remain very serious. If we relax a little, the scheduled population control plan for the year 2000 will quite possibly be unfulfilled. This will no doubt affect the economic and social development of the whole province and the realisation of each item of set targets.

Therefore each level of Party committee and government must pay great attention to the population issue, [and] further strengthen the leadership in planned birth work. Party committees and governments must carefully study planned birth work at least twice a year, and solve the actual problems arising from [this] work. The main

leaders of the Party and administration must be personally involved with this work, and in each case there must be a leader who is specifically responsible for planned birth work. Other members of the leadership must also cooperate with them. Each level of planned birth coordinating groups must be sure to shoulder its responsibilities and coordinate each department to make common efforts to do planned birth work well. Each department and mass organisation must pay attention to and support planned birth work. On the basis of their own situation they must draft their detailed method of planned birth work and must implement it accordingly. [Furthermore] each level of planned birth committees must do well each item of management and service work and raise to a new standard the work of planned birth in our province.

In order to strengthen leadership in planned birth work, it is decided that the member of the Provincial Standing Committee, Xu Shiqun, be Deputy Group Leader of the Planned Birth Leading Group of Sichuan province.

**CPC Sichuan Provincial Committee  
Sichuan People's Government  
18 July 1990**

[pages 87-93]

[Sichuan Provincial Leading Group for Planned Birth, 29 March 1990]

### **[9] Report on Further Strengthening Planned Birth Work**

To the provincial committee and provincial government:

Birth control work in our province under the leadership of the provincial committee and the provincial government has made great developments and remarkable achievements because of the emphasis by each level of Party and administration and the great support and cooperation among each department, as well as common efforts by all the members of planned birth groups. Since the start of planned birth in 1971, 25,000,000 fewer people have been born in the whole province. This has brought both social and economic benefits.

At the moment the population situation in our province is very serious. The task of planned birth work is very arduous. The population figure and the density in our province is high. The population density per square kilometre is 187; this is 73 more than the average national figure, is equivalent to the population density of Europe, Latin America, North America and Africa put together [TIN note: UN figures of population density per square kilometre for 1986: Europe 101; South America 15; North America 17; Africa 19], and is six times the average world population density. Meanwhile we are facing high birth rates which will last as long as 13 years. Both the duration and the size of our baby boom are above the average national level.



According to the present provincial birth policy and current estimates of workload, it is estimated that from 1991 to 1995, during the eighth five year plan period, on average each year, the number of women becoming 21 years old will be 1.457 mn [and] the average number of births will be 2.3 mn. Within five years, 11.3 mn people will be born. For the five years from 1996 to 2000, the number of women reaching 21 years of age each year will be 920,000. During the ten years 1991-2000, 20.5 mn [children] will be born. Subtracting 6.35 mn deaths, the total increase will be 14.15 mn. Thus, on the basis of 105,870,000 people in 1989, the total population figure by the end of this century will be 122,340,000.

Therefore the next ten years, especially the seven years before 1996, is the most crucial period for our province in controlling population. If we can keep the total population figure within 120 mn by the end of this century, then the total figure of the province will reach 132.56 mn to 134 mn by the middle of the next century. Then it will basically stabilise and gradually form a relatively reasonable population structure. If the total population figure by the end of this century greatly exceeds 120 mn, the time when the population will stabilise will be delayed and the peak population figure will exceed 140 mn, and [as a result] our province will continue to suffer greater population pressure than the rest of the country.

In the face of the serious population situation, we have now formed the following opinion on further strengthening planned birth work:

### **1. Continue Intensively to Implement the Sichuan Province Planned Birth Procedure (abbreviated to "The Procedure") and Manage Planned Birth According to the Law.**

In order to do planned birth work well, we must firmly, carefully and completely implement down to the last detail the present birth policy and strictly carry out "The Procedure" and manage planned birth according to the law.

As for the present situation, it is not balanced enough. Some rules and regulations provided in "The Procedure" are not carried out in parts of the work units. More specifically, the classification of where to implement the policy is in some areas not very strict. It classifies [some] parts of low hill counties as high mountain areas. Some even classify all the countryside of a county as high mountain areas.

Therefore when carrying out "The Procedure" all departments must put the emphasis of their future work on strict classification. They must correct the planned birth policy according [to] the rules in "The Procedure". Where rules are more relaxed than in "The Procedure", they must be corrected and must conform to the rules in "The Procedure". We must ensure conformity between policy and planning, and ensure strict management of the [birth] targets. No department or work unit is allowed to permit extra-plan births.

## **2. Emphasise the Countryside and Start a Broad and Intensive Nationwide Population and Planned Birth Education Programme.**

The departments at each level of organisation, propaganda, education, planned birth and agriculture etc. must first of all continue to do well and with care the work of education in basic knowledge of population and planned birth, with the emphasis on the countryside. In addition they must provide good education for cadres, especially leading cadres and Party members, as well as students at middle school level and above, in the scientific understanding of the Marxist theory of population and the related policy and regulations.

Each level of Party school and cadre school must set up a population course or lectures. Each level and all types of school must set up population education and youth education courses. Whether in the countryside or towns, we must all tightly grasp the key issue of education in the state of the country and enable the masses of cadres and masses to understand sufficiently the basic state of our country: a big population, poor basic infrastructure and relative lack of resources, and to strengthen consciousness of population [issues], the idea of equality [renjun] and legal knowledge, in order to raise awareness of the practice of planned birth.

## **3. Be Sure to Strengthen the Basic Work of the Basic Units**

Basic unit work is the basis of the whole planned birth project. Each level must pay attention to overcoming neglect of the work of the basic units. We must avoid those situations in which the levels above are enthusiastic and the basic units are unenthusiastic. We must make great efforts to ensure the strengthening of the basic units' work.

1) We must further strengthen the construction of basic units leading groups. Among the leadership of the Party and administrative authorities at the same level, planned birth leading groups must be fully established in villages (and towns and neighbourhood offices) in order to organise and co-ordinate the relevant departments so as to realise fully the Party's planned birth policy and to ensure the fulfilment of the birth plan.

2) We must be sure to strengthen the construction of planned birth basic units teams. In recent years, because of promotion and staff transfer, there has been a serious lack of full-time planned birth cadres all over the province. In many places, temporary employees are hired to do the job. Therefore each place must carefully implement the decision of the meeting of the standing office of the provincial government so as to comply with the regulation set out in Document No.65 issued by the CPC Central Committee (1978) as well as Document No.65 issued by the office of Sichuan Provincial Committee (1983). This demanded that each area must allocate fully professional planned birth cadres to the districts and villages. Where there are no professional planned birth cadres provided according to the regulation at village levels, they must be provided. The grain ration for planned birth specialised cadres should be the same as that of other administrative cadres at the same level.



Benefits and political treatment should also be the same as that of other village cadres.

We must pay attention to maintaining the stability of the planned birth cadres' teams, especially those at the basic levels. Where there is promotion and transfer of planned birth leading cadres above the level of counties, organisational and personnel departments must both seek the opinion of the planned birth department at a higher level. Where planned birth cadres below the level of county are concerned, the opinion of the county planned birth committee must be consulted first before action. The vacancy caused by the change and transfer of cadres must be filled without delay.

We must strengthen training for cadres and constantly raise the political and professional standards of the teams in order to meet the demands of the expansion of the planned birth policy.

At the moment the biggest problem facing planned birth work in many places is that very often there is no-one doing regular planned birth work in the villages and communes. We must be sure to choose people with good political consciousness and who are keen to work for the masses as planned birth instructors [*zhidaoyuan*] and service workers [*fuwuyuan*] in villages and communes. We must also give them reasonable payment. Only through this method can we really make planned birth work into a regular exercise rather than a momentary breakthrough, and only thus can the propaganda education and contraceptive service take real shape.

We must energetically develop the basic-level planned birth associations and emphasise the good construction of the associations at village and hamlet [*cun*] level. Because the associations are still at a primitive stage, they must be given support and help in funds and staffing. This will enable them to fully achieve their special function, which is to unify the masses and organise them to carry out self-education, self-management and self-help, and strengthen the relationship between the Party and the masses and cadres and the masses.

3) We must strengthen the planned birth propaganda technical service network in the basic units. This is important as it ensures that there is a change in the nature of planned birth work from miscellaneous action after pregnancy to planned birth before pregnancy. Each level must greatly strengthen planned birth propaganda technical service stations and offices in the counties, districts and villages. They must gradually realise the 'three sets' [*san peitao*] of personnel, buildings and equipment. They must closely co-operate with the health departments to carefully adopt the long-term pregnancy [control] method of giving those with one child the coil, and sterilising [*jieza*] those with two. Be sure to look after the masses in the countryside and provide planned birth technical services to each childbearing couple.

4) We must stick to specific guidance, help key units [*zongdian zuohao*] and push the backward ones [*houjin zuanhua*]. We must all emphasise helping those areas which have the most difficult task to change as soon as possible. We must adopt the method of combining

collective activity with constant work, and treating the root as well as the leaves [*zhibiao zhiben*].

We must be firm in never allowing any indulgence in giving birth, must carefully prevent early marriage and early births as well as multiple births, make sure to reduce extra-plan births on a large scale and make real efforts to achieve population planning. Meanwhile we must be sure to implement the policy favouring the single child, ensure the provision of old-age insurance for single children and their parents in order to consolidate and build on results which have already been achieved.

#### 4. Carefully Prepare the Planned Birth Work Fund

Right now our province is at its birth-rate peak. Because of the large number of people entering the marriage and child-bearing age-group, it is harder to find planned birth work funds. Each level of government must carefully study the decision made at the meeting of the standing office of the provincial government. They must not only not reduce the planned birth fund, but also guarantee the necessary expenditure for operation fees and funds for contraceptive medicines and devices. They must also increase planned birth funds each year.

Meanwhile everyone must be sure to step up the collecting, management and use of the extra-birth penalties. The penalty fee must only be used in [furthering the] planned birth cause. Those who use it otherwise must be stopped at once, and ordered to return it by a deadline. Each level in the planned birth department must lead a hard and simple life and carefully manage every penny in order to increase the efficient use of capital.

#### 5. Further Expand the Functions of Each Level of Planned Birth Committee

The planned birth committee at each level is the functional department responsible for planned birth work at each level of government. They must rouse a high level of enthusiasm and show initiative in their work. They must also strengthen the idea of service, improve management, pay attention to doing real work, be creative, and be good consultants for the Party committee and the government.

Working groups and investigation groups of all sorts must be organised to go to the basic units, especially where there are the greatest difficulties in work. Investigation and research must be carried out in order to help and guide their work. They must do good and solid deeds for the basic work units.

We must educate the basic unit planned birth cadres to securely establish the ideology of serving the people, constantly raising their policy standard and working ability, ensuring the improvement of their working method and style, strengthening the relationship between the Party and masses and the cadres and masses, and paying great attention to safeguarding the enthusiasm of the basic-unit cadres.

We must strengthen the construction of a clean administration. We must practise an open system of family planning. We must practise the "two open, one supervision [*liang gongkai yi jiandu*]" policy in the basic

units' birth-control plan and extra-birth penalty fee collection, in order to encourage the enthusiasm of the masses for participating in management.

## **6. Further Strengthen the Leadership, Continue to Promote the Development of Overall Management [zonghezhi]**

Birth control work is concerned with the overall situation in economic and social development. Each level of Party committee and government must strengthen population [growth] awareness and the idea of equality, strengthen their sense of urgency and historical responsibility in planned birth work. They must be sure to put planned birth work high on their agenda. The major leaders must be personally involved. Special meetings must be held twice a year to discuss specific questions seriously, to make decisions and assign tasks during those meetings, and to solve real problems and key difficulties arising from actual work. Each level of planned birth leading groups must do their own work well, and be directly responsible for planned birth work in their own area.

We must implement the population target management responsibility system level by level. We must take progress in planned birth work as an important indicator for judging whether the Party committees and governments have done good work. We must stick closely to rigorous examination and the system of reward and punishment. We must give rewards to those work units which do their planned birth work well, and which have fulfilled their population plan, and must establish the responsibility of the leaders of those work units which caused the population to rise out of control because of weak leadership.

Birth control is basic to the social system [shehui xitong gongcheng], and society must be mobilised and organised to carry it out. Each relevant department and all the mass organisations must undertake as their own task the basic state policy of implementing planned birth work.

They must co-operate voluntarily with each other. They must especially consider, while drafting social development and economic policies as well as adopting administrative and legislative methods, that these actions must be beneficial to the development of planned birth work, and that they do not 'collide' with basic state policy. The departments of legal [affairs] and

administration must undertake as their own responsibility the implementation of "The Procedure".

Such work units as propaganda, culture, broadcasting, television and press must regard frequent propaganda for planned birth as part of their job. The economic planning departments must make a population plan and often check its implementation. Finance, personnel and staffing departments must help the planned birth departments to improve their working conditions and to equip them where necessary; the health departments must both carry out contraceptive operations well and start [to combine education in] quality birth and quality upbringing with controlling population quantity and eugenics. They must be sure to do the work well.

Departments and organisations such as industry and commerce, public security and private labourers' associations must greatly strengthen the mobile population's planned birth management. The departments of education and science and technology must co-operate in order to carry out well education in [understanding] population and planned birth. Industry, the Youth League, the women's association and people's administration departments must take as their own responsibility to do work well relating to late marriage and late childbirth.

The departments in the development office, the agricultural committees and the village and township enterprises must further study how to assist the poor with planned birth. They must halt the vicious circle of "the poorer one is, the more children one has, and the poorer one gets". In general, each level of government must actively explore the route to combining planned birth work and other work in order to better carry out the overall management of the population problem.

Assuming there is nothing inappropriate in this document, it should be passed to each local department to carry [it] out.

**Sichuan Provincial Leading Planned Birth Group  
29 March 1990**

(sent to the county levels)  
Theme words: Planned Birth, Announcement  
CPC Sichuan Provincial Committee Office  
Printed on 25 July 1990

[pages 94-95]

[Ganze Tibetan Autonomous Prefecture People's Government, 6 January 1989]

## **[10] Ganze Tibetan Prefecture People's Government's Announcement on the Implementation of the Target Management Responsibility System in Planned Birth Work [1989].**

**The Ganze Tibetan Prefecture People's Government Document No.1 (1989), issued by the Ganze Government**

To: The people's governments of all the counties, and all prefecture government departments:

According to the spirit of the "announcement on the implementation of the target management responsibility system in planned birth work" issued by the Sichuan

Provincial People's Government, in order to adjust the population growth to economic development in our prefecture, adopt forceful methods to do planned birth work well, and strictly to control the over-quick growth of the population, the prefecture government has decided upon the following:

Starting from 1989, the target management responsibility system for planned birth is to be implemented all over the prefecture in order to strengthen the responsibility of each level of government to do planned birth work well. The following announcement is made:

### 1. Target and responsibility during the term of appointment [renqi]

The fulfilment of each item of the planned birth quota and the implementation of "Some Rules on Further Perfecting the Planned Birth Policy in our Prefecture" (Ganze Document No.91 (1985)) and the "Ganze Prefecture Planned Birth Procedure" (to be issued), are to be taken as two important indicators in examining the administrative achievement of each level of government. The population plan must be included in the general planning of the economic and social development of the local area. The targets and responsibilities [for the leader in planned birth work] during the term of appointment will be associated with reward and punishment.

### 2. Management target content

The four quotas to be examined annually [niandu] according to the target for population control set up by the province to our prefecture, on the basis of reality in our prefecture, are: the number of births, the planned birth rate, the number of extra-plan births and the number of multiple births prevented. Hereby we issue the 1989 and 1990 planned quotas.

Meanwhile we issue the contract for staged quotas [fenduan baogan zhibiao] for the year 2000. The director of the prefecture, and the deputy director who is the main person responsible for planned birth work, will sign separate target management responsibility contracts for planned birth work with each county director and deputy director who is responsible for planned birth work.

### 3. Method of implementation

Total marks in the examination are 100. Those who do not exceed the prescribed number of births get 30 marks; those who achieve the planned birth rate get 30 marks; those who do not exceed extra-plan birth numbers get 20 marks; those who do not exceed the prescribed number of multiple births get 20 marks. The assessment of each target should be based on a random sample of 1% of the population of each county post-code district; this should be carried out by the prefectural planned birth committee. Detailed examination methods and evaluation standards are to be decided upon by the prefecture planned birth committee.

### 4. Rewards and punishments

1) Rewards: full marks are 100. The unit for assessing rewards is the county. Above 98, a first class mark, the award is 1,500 yuan; 95-97, second class, award 1,000 yuan; 90-94, third class, award 500 yuan; 85-89 neither award nor punishment. Marks lower than 85 will be punished. Continuous first class awards will earn [the title of] red flag work unit, and will receive a special one-

off prize. The award fund is to come from the planned birth fund.

As for the reward for the responsible person concerned [zerenren], a period of one year should be used to assess punishment and reward. That is, the director of the prefecture, the deputy director mainly responsible for planned birth, the county director and the deputy county director in charge of planned birth will each hand over 100 yuan as a responsibility fee.

Those who get a first class award will have their 100 yuan refunded, and receive an additional 300 yuan; those who get second class awards will have their 100 yuan refunded, and receive an additional 200 yuan; those who get third class awards will have their 100 yuan refunded, and be given an additional 100 yuan; for those with 85-89 marks who get neither award nor punishment, the responsibility award will be returned, but for those with less than 85 the responsibility fee of 100 yuan will not be returned.

The responsibility fees will all be managed by the prefecture planned birth committee.

2) Punishment: Those who cannot fulfil the quotas to be examined will be criticised. Those who do not fulfil the quotas for two years running will be criticised openly in a circulated report and the person involved will have to write a written report to the prefecture government; [in the case of] those who do not fulfil quotas for three years running, the main leaders and those directly in charge will be held responsible. Those who have caused population [increase to get] seriously out of control will be demoted one post or one grade, or even be dismissed as punishment.

Statistics giving details of the implementation of the plan will be published once a season, taking villages and hamlets as statistical units. The masses will be able to inspect these figures. If they report any falsification, the prefecture planned birth committee will investigate, along with the accountancy and disciplinary examination departments. If the complaint is upheld the relevant personnel will be held responsible and will lose their honorary titles and awards. They will then be punished according to the circumstances.

5. The responsibility system in population target management is a scientific method of management invented during the course of planned birth reform. Each county people's government must carefully organise the masses to implement it. The county can refer such methods to the district and village governments to implement the target management system level by level. In the course of implementation, they must investigate and solve new problems in the process of target management, in order to perfect it.

Ganze Tibetan Autonomous Prefecture People's  
Government  
6 January 1989

CC: Prefecture Committee Office, Office of the Standing Committee of the Prefecture People's Congress, Office of the Political Consultative Committee of the Prefecture, Prefecture Law Court, Prefecture Procuratorial Court, Ganze Military Region.



**Office of the Communist Party of China, Ganze Prefecture Committee  
Office of Ganze Prefecture People's Government:**

**[11] Announcement on Further Improving the Planned Birth Work Target [1991]**

**[11] the Office of the CP Ganze Prefecture Committee, Document No.11 (1991)**

Each county committee, county people's government, each department in the prefecture, each county enterprise above the level of county in the prefecture:

According to the spirit of the "announcement on further improving the target management responsibility system for planned birth work" by the Sichuan People's Government, our prefecture has started implementing the planned birth target management responsibility system within the prefecture since 1989. During the [last] two years, each level of Party committee and government has ensured strengthening their leadership, carefully carried out their responsibility, and the planned birth cadres and basic units' Party and administrative cadres and relevant departments have all helped each other and worked hard.

Thus we have effectively controlled the over-quick growth of population in our prefecture despite the severe situation we are facing now - the third population birth peak. We have made positive contributions to the realisation of the target for economic and social development for the 7th five year plan. This year is the first year of implementing the 8th five year plan. Thus it is very important to continue to adopt forceful methods to do planned birth work well in order to adapt the level of population development to that of the economic development in our region.

According to the spirit of Document No.26 (1990) [issued] by the Sichuan Committee, in order to strengthen the Party's leadership over planned birth and to perfect the population target management responsibility system, the prefecture committee and the prefecture government decided that, starting in 1991, within the prefecture, each level of Party committee should also participate in planned birth work target management, to implement the target management responsibility system along with the government in order to strengthen the responsibility of each level of Party committee and government to do planned birth work well. The following announcement is therefore made:

**1. The aim of the target management responsibility system**

To take as important indications in examining the administrative achievements of each level of Party committee and government the implementation of "Ganze planned birth procedure", and the fulfilment of each quota of planned birth; to include the population plan in the overall planning of local economic and social development, practice the target management responsibility system associated with rewards and punishment.

**2. The contents of target management**

According to the population control target the province has given us, and on the basis of the realities in our prefecture, the six big quotas for yearly examinations are: basic work, the number of births, the planned birth rate, the rate of control of multiple births, and number of controlled out-of-plan births, and number of birth restricting operations. All these six big quotas will each year be distributed to each county by the Prefecture Planned Birth Committee.

Each county director and vice-director who is responsible for planned birth will separately sign planned birth work target management responsibility contracts with the chairman of the prefecture committee, the vice-chairman who is the main person responsible for planned birth, the director of prefecture and the deputy director who is responsible for planned birth work. For the planned quotas for 1991 see attachment 1.

**3. The method of examination**

The total marks are 100. Among them: Those who do their basic work well get 30; those who do not exceed the controlled number of births get 20 marks; those who fulfil the planned birth rate get 20; those do not exceed the multiple child planned birth number get 10; those who do not exceed the extra-plan planned birth number get 10 marks; and 10 marks go to those who fulfil the birth restricting operation number.

The standard size of each quota is according to the sample chosen by the prefecture planned birth committee. The total mark minus the mark deducted from the sample is the actual mark. The detailed method of examination and evaluation is to be decided upon by the prefecture planned birth committee.

**4. Reward and punishment**

1) Reward: Full marks are 100. The unit of reward is the county or department. 95 or above is a first class mark, and the award is 1,500 yuan; 90-94 is a second class mark and the award is 1,000 yuan; 85-89 is third class, and the award is 500 yuan; 80-84 gets neither award nor punishment. 79 or below will incur punishment. Those who get first class marks three years running will be awarded [the rank of] red flag work units and will receive a one-off reward. The money is to come from the planned birth fund.

The responsible persons will receive reward or punishment on the basis of a period of one year. These are: the secretary of the Party committee of the

prefecture, the vice-secretary who is responsible for planned birth, the director of the prefecture, the deputy-director of the prefecture who is responsible for planned birth, the county committee secretary, the vice-secretary of the county committee who is responsible for planned birth, the county director and deputy-director who is responsible for planned birth work. They must each pay 100 yuan as a responsibility fee.

Those who are awarded first class marks will have their 100 yuan refunded and be given in addition 300 yuan; those who are awarded second class will have their 100 yuan refunded, and be given in addition 200 yuan; those who are awarded third class will have their money refunded, and be given 100 yuan; those who get neither reward nor punishment will have their 100 yuan refunded; those who are punished will not have their 100 yuan refunded. The responsibility fee will be managed by the prefecture planned birth committee.

2) Punishment: Those who cannot fulfil the examination quota will be criticised; those who for two years running cannot fulfil the examination quotas will be criticised openly in a report, and the main persons responsible will write a written report to the prefecture committee and the prefecture government; the senior leaders and the leaders responsible will be held responsible where they do not fulfil the examination quota for three years running; those who have caused the population to get seriously out of control will be demoted by one post or grade or even be dismissed from their positions, according to the circumstances.

Statistics giving details of the implementation of the plan will be publicised among the masses for the masses to inspect, taking villages and hamlets as units. If they report false information, the prefecture planned birth committee must, together with accountancy, disciplinary examination and supervision departments, investigate the matter. If it is confirmed, they must strip the honorary title from the person concerned, take back the

reward, and hold the relevant personnel responsible according to circumstances.

5. To practice the population target management responsibility system is a scientific method of management developed in the course of planned birth reform. Each county committee and government must carefully organise themselves to implement it. The county can refer to the above method with reference to districts, village Party committees and governments and other relevant units in order to implement the target management responsibility system level by level, so that they can perfect the management system of "down to the bottom" [*zongxiang daodi*] and "depth and breadth" [*hengxiang daobian*].

In the course of implementation, they must constantly study and solve the new problems arising from target management and must constantly improve the method.

Attachment: Ganze prefecture planned birth target management responsibility contracts

**Office of CPC Ganze Prefecture Committee  
Office of Ganze Prefecture People's Government  
4 February 1991**

Theme words: Birth control, Target Management,  
Announcement

Report to: office of the provincial committee, office of  
the provincial government

CC: Provincial Planned Birth Committee  
Office of the CPC Ganze Prefecture Committee

Printed 4 February 1991

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[end of document TIN Ref.: 7(XB)]

## 1992 TAR Birth Control Regulations (TIN Docs.1(XL)/18(YC))

### The TAR "Method" - Version 1 (TIN Doc.1(XL))

Date issued: 8 May 1992

The original in TIN's possession was 17 pages long, but pages 10 and 14 are missing. The pages are numbered 1-17 at foot in Arabic numerals except for page 6 which has no number. It is an official document printed in Chinese in large characters on headed paper of the TAR Planned Birth Leading Group. Page 1 is stamped with an official seal in Tibetan and Chinese (not legible) over the date. The right hand margin and some words on page 9 and page 12 are missing because the original was photocopied off-centre. The document is believed to be confidential. The cover is missing but the words "Handle with care - confidential" have been added by hand at the foot of page 1. Although a draft it is stamped and appears to have been issued for enforcement.

### Version 2 (TIN Doc.18(YB))

The original in TIN's possession is 15 pages, printed in Chinese in large characters. It is an official TAR document. There are handwritten emendations on page 1 and page 10. The page numbers have been added at the foot of each page in Arabic numerals by hand; some pages have printed page numbers also, but these numbers do not match with the handwritten sequence. There is no cover page giving details of the status of the document or the issuing authority. It appears to be a draft of Version 1 (Doc 1(XL)).

### Introduction: Comparison of Two Texts

The TAR Birth Control Leading Group issued a document defining birth control regulations in May 1992. The document sets out detailed rules on administrative and fiscal management of the policy, as well as the rewards and punishment to be meted out to those who comply with or contravene the regulations.

The policy is to encourage late marriages, delayed births and births at long intervals, preferably of only one child, but in no cases of more than three.

The translation printed here is a compilation of two documents received by TIN. The first is a photocopy of an original document, which is described in its title as a "draft". Since this text (TIN Doc. 1(XL)) is stamped with an official seal and marked for full distribution to counties, and so on, we have considered it to be the most authoritative text and called it "Version 1". The other text (TIN Doc.18(YB)) has no title page or cover, so it is not possible to tell whether it was marked as a draft. We have called this text "Version 2". Both documents are largely the same, but contain some stylistic and substantive differences.

Our assessment is that Version 2 was the earlier draft and that Version 1 was the revised and distributed version of the document. We based this conclusion on a number of technical differences between the two documents. For example, Version 2 (TIN Doc.18(YB)) did not contain any of the introductory material in Version 1 (TIN Doc.1(XL)) explaining how important the birth control policy is; nor did it list each level of the TAR and People's Government to which the document is addressed and to whom it should be distributed, as well as showing that the People's Government had agreed upon the distribution of the document.

A number of the differences between the two versions are purely technical changes, where Version 1 appears to have removed excessive or repetitive material from the earlier draft. For example, at Article 23 (Chapter 3, "Management"), Version 2 includes a long description of specific tasks for planned birth work among the mobile population which is deleted in Version 1 and replaced by a reference to "the National Planned Birth Management Procedure for the Mobile Population". Version 1 also deletes Article 46, which again discusses the mobile

population, probably because it has already been covered by the Version 1 revision of Article 23. Article 47 in Version 2, covering birth control in rural areas, has been removed, probably because it is already covered by Article 9.

Version 1 has one major addition of a technical kind, which is a formal declaration of basic principles, when it inserts as its first operative sentence the statement that "It is a basic state policy of our country to practice birth control." This addition alone, a significant improvement on the other text, makes it almost certain that Version 1 is the later text.

Most of the differences between the two versions appear to represent a softening by Version 1 of tougher demands in the earlier draft. The clearest example of this is in Article 33, which describes the penalty for Chinese cadres and workers in Tibet who have their first unauthorised child. In Version 2 the punishment for this was compulsory sterilisation; in Version 1 the punishment is "advice" to have a sterilisation.

Similar softening of tone can be seen in Article 3, where Version 2 says that the government must offer contraceptive technical services "while providing the necessary restrictive administrative and economic measures". Version 1 deletes the word "restrictive".

There are a number of other examples of the softening amendments made by Version 1. In Article 9, Version 2 stated that in agricultural and nomadic areas government officials should focus on "propaganda, contraception and cooperation". Version 1 adds "education" to this list, and replaces "contraception" with the wider term, "providing services".

The article continues in this more moderate tone by stating that officials should "stress [our emphasis] that couples who already have three children no longer give birth", whereas Version 2 included the much harsher directive that "couples who already have three children should no longer give birth". Moreover, Version 1 emphasises the role of education by adding a sentence here (taken from Version 2's Article 47) which states that officials "must start by trying out propaganda work, and then gradually widen the scope [of the movement] on that basis".

In Article 5 Version 2 says that "Citizens give birth under the guidance of state planning". Version 1 deletes this sentence, and re-states it as a general principle in Article 1. Omitting it from Article 5 gives the effect of softening the Government's insistence that all childbirth is subject to official guidelines.

Rewards for compliance are slightly better in Version 1. In Article 26, Version 1 doubles the amounts of sticky rice and edible oil given as rewards for women who have late abortions. In Article 29, Paragraph (7), Version 1 adds a paragraph saying that Tibetans who volunteer to have only one child should be given the same rewards as Chinese cadres and workers, and sterilisations. In Article 32, which discusses hardship subsidies to the poor, Version 2 stated that after a voluntary birth control operation, the village government was responsible for offering an appropriate food subsidy. Version 1 calls for "appropriate awards where there are good conditions in the area". This removes the insistence that the responsibility falls on the village government, and appears to make it easier for the authorities to avoid having to give a subsidy. However, Version 1 offers wider access to the rewards by deleting the reference to "operations", which in effect says the award should be given for any poor person who practices planned birth, irrespective of whether this involves an operation.

Some of the divergences between the two texts appear, if Version 1 is the later text, to be a toughening of the earlier draft. The most prominent hardening of position occurs with Article 14 of Version 2, which in Version 1 is completely deleted. This article promised free medication and treatment to those who were injured by a birth control operation. Unlike similar laws in China, Version 1 does not make concessions to



The presentation of the eugenics law showed some concern about incurring international censure. The draft legislation avoided the issues of artificial fertilisation and test-tube babies, as both issues were still the subject of moral debate.<sup>108</sup> The legislators had considered introducing legalising euthanasia to eliminate congenitally abnormal children, but in the end this was excluded from the draft law because the international community had "not come to a conclusion on the issue". The law awaits confirmation by the Congress, and then will wait for implementation procedures to be enacted in the provinces and regions.

## 5.5 Evolution of Future Policy

The presentation of the national eugenics law was preceded, as is usual with important or sensitive shifts in Chinese policy, by a scholarly lecture in the columns of the People's Daily. In August 1993 the demographer Tian Xueyuan offered through its columns a complex neo-Malthusian thesis which sought to equate economic development with the automatic arising of a desire to practise eugenics. "The vast countryside and towns between the first and second categories are now effecting a change from quantity to quality and are effecting a transition from giving more births to eugenics", wrote the scholar.<sup>109</sup> What he meant, in simple terms, is that the Chinese authorities wanted fewer children, but wanted more of them to be better "products" - in his example, scientists, technicians and university graduates - and that it intended to achieve this by sterilising lower quality people.

He described the implementation of eugenics as a higher form of social development, which is inevitably supported in market economies by people as they become more evolved. According to this determinist view, family planning policy has to progress, in proportion to the rate of social development, from a strategy which limits the numbers of children born to a strategy which limits the types of children born.

This adds a new dimension to the patterns of policy progression which were described in Tibet: in the TAR policy advanced from the town to the countryside, and from the gentle to the restrictive, while in Eastern Tibet, it went from the remote areas to the villages, from the repressive to the financial. Now it is planned that the birth control policy will progress from quantity to quality.

Tian did not refer directly to minority nationalities in his article, merely including them in a "third category" of people with a low level culture who live in remote areas:

*At the moment the remote villages and towns where the market economy is underdeveloped and the economic, cultural, scientific and technological level is relatively low - still remain at the level of giving more births. [...] We should gradually effect a transition to this: [...] encourage people to link the number of births with their own interests and consciously take the road of eugenics.*

This means that Tibetans, along with other nationalities, will be expected to obey eugenic laws once they have completed the implementation of birth control laws, and that if they do not do so they will be regarded as underdeveloped. For Tian, this vision may have had a special significance, because it was he who ten years earlier had sought to prove in an obscure journal that the

minorities were set to outnumber the Chinese unless controls were imposed upon them. The elevation of his eugenics theory to the columns of the People's Daily meant that the Party had this time sanctified his views. It remains to be seen whether the Chinese authorities will wait for the peoples of the "third category" to evolve towards that higher stage of consciousness which Tian describes, in which they will apply eugenic controls to themselves of their own free will; or whether Beijing will, as on previous occasions, give up waiting and implement this destiny upon the non-Chinese by force.

<sup>108</sup> Xinhua, in English, 20 December 1993 (SWB 22 December 1993, FE/1878 G/2 [5](a)).

<sup>109</sup> "My View of the Market Economy and Family Planning", Tian Xueyuan, Institute of Population Studies under the Chinese Academy of Social Sciences, *Renmin Ribao* (People's Daily), 9 August 1993, p.3 (SWB 27 August 1993, FE/1778 B2/3 [6]).

Table 2

Number of children allowed to different groups in TAR and Ganze (Fines in yuan for first unauthorised child)						
	TAR 1985		Ganze 1989		TAR 1992	
		fine-----		fine-----		fine-----
Chinese urban	1	500	1	7 yrs @ 15%	1	3,000
Intermarried	2	150	2	"	2	500?
Chinese mobile	-	-	0	1,000	0	8,000
Chinese rural	-	-	2	7 yrs @ 15%	1	3,000
Tibetan cadre, worker	2	150	2	"	2	500
Tibetan urban resident	2(?)	150	2	"	2	500
Tibetan rural	-	-	3	"	3	-
Tibetan mobile	-	-	0	1,000	0	8,000

## Notes to Table

1. The 1985 TAR fines are described as punishment for failing to observe the correct interval between births (3 years); no mention is made of punishment for having an extra child.

2. It is not clear whether 1985 TAR restrictions cover all urban Tibetan residents, or only urban Tibetans working in state enterprises or offices.

3. "Mobile" people are those who do not have registration papers for the area where they are living. They are sterilised in

the TAR if they have a child out of plan unless they return to the place where they are registered.

4. Chinese living in rural areas of Ganze can have 2 children if they are market gardeners, farmers or nomads, or if they have lived there, in a high remote area, for 8 years. If they also live in an isolated place they can have three children.

5. All of these categories (except "mobile" people and genetically disabled people), can have one extra child in special conditions, such as when a previous child is seriously handicapped with a non-hereditary disease.

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end

TIN Background Briefing Paper,  
March, 1994

(1) One of the children was diagnosed as disabled by a non-hereditary disease and cannot grow up to be a normal labourer;

(2) A remarried couple altogether has only two children;

(3) One member of the couple has a disability rated class 2 grade 1;

(4) One member of the remarried couple whose spouse died had three children (not including extra births) and it is the other member's first marriage or they have never given birth.

Article 9. In the heart of the agricultural and nomadic areas, we must focus on education and propaganda, cooperation and providing services. We must advocate fewer births, quality births and births at intervals, and stress that couples who already have three children no longer give birth. We must start by trying out propaganda work, and then gradually widen the scope [of the movement] on that basis.

[Version 2 here reads: *In the heart of agricultural and nomadic areas, we must stick to the principle of relying on propaganda, contraception and cooperation, we must stress the importance of fewer births, quality births and births with intervals. Couples who already have three children should no longer give birth.*]

Article 10. Do not advocate birth figures in the border agricultural and nomadic areas nor among the Menba, Geba and Xiaba and Deng nationalities. However, we must greatly propagate 'The Marriage Law', widely advocate new methods of childbirth, carry out propaganda education on reasonable births, quality births and quality upbringing, and make an effort to raise population quality.

[Version 2 begins: *Do not practice planned birth in the counties, villages (districts) in border agricultural and nomadic areas as well as other minority areas within the region whose population growth is much too slow.* [The rest of the article is the same].

Article 11. We must strengthen [and promote] the marriage registration system [and the pre-marriage examination system], widely advocate the premarital examination system, [not in Version 2] and forbid the marriage of near relatives, of people with uncured sexual diseases and leprosy. We must forbid births by people who have serious hereditary diseases proved by medical evidence.

Article 12. We must stick to contraception as the main method and widely combine a mixture of planned birth measures. The Government should offer contraceptive medicine and equipment free of charge under the plan. Couples of childbearing age must implement effective contraceptive methods and extra-plan pregnancies must be dealt with by appropriate methods.

lp6]

Article 13. Planned birth and medical departments must satisfy the demand of the broad masses of people to practice planned birth, including technical guidance, contraceptive operations and supply of medicine and equipment.

[Version 2 has an additional article as the last paragraph of Chapter 2, as follows: *Article 14. Free medication and treatment will be given to those who are diagnosed by the examination group above the level of area (city) as having a disease caused by the operation*]

### Chapter 3. Management

Article 14. Government offices and industries and other work units must take planned birth, late marriage and late births as an important test for promotion. They must put forward and evaluate models and advanced workers according to the same standards. Whenever a cadre or a worker is transferred to another work unit, his/her planned birth situation must also be put on file.

[Version 2 does not have the above paragraph but includes the substance in a slightly different form in its Article 16 below]

Article 15. Each area (city) and county must establish a planned birth leading group and offices equipped with specially trained cadres.

Article 16. [Article 15 in Version 2] Each level of the Planned Birth Administrative Management Department is the functional department which is mainly responsible for the planned birth work of the People's Government at the same level. It is responsible for realising the implementation of relevant planned birth policies, rules and decisions. It is also responsible for checking and supervising the execution of planned birth rules and population plans.

[Article 16 of Version 2, substantively the same as Article 14 of 1XL: *Article 16. The state organs and enterprises must use planned birth, late marriage and later birth as an important test for promotion and raises of salaries as well as evaluating advanced model workers and cadres. When a cadre or a worker change jobs, their success in carrying out the planned birth [policies] must be written into their examination reports.*]

lp7]

Article 17. The *xiang* (town) people's government, neighbourhood office must establish a planned birth office or specially trained cadres to be responsible for the planned birth of the area for which he (she) is responsible. The Village (residents) committee must specially designate personnel to be responsible for planned birth work.

Article 18. The Planned Birth Management Office of the *xiang* [township] people's government and of the neighbourhood office is responsible for the following work:

(1) propagating and carrying out relevant planned birth policies, methods, rules and regulations;

(2) propagating information on population, planned birth, quality births and quality upbringing;

(3) distributing contraceptive medicine, guiding, helping and supervising the couples of childbearing age to implement contraceptive methods;



(4) providing rewards and penalties according to the scope of its responsibilities;

(5) carrying out statistical work on planned birth;

(6) carrying out other planned birth management and service work.

Article 19. The state apparatus, social organisations, industries and other work units must establish planned birth institutions or equip special personnel (or part time workers) to be responsible for planned birth within its own apparatus or work units. Their responsibilities are the same as those described in Article 18.

Article 20. Examination organisations or specially designated medical institutes will be jointly formed by planned birth and medical health departments to be responsible for the examination of diseases caused both during and by the planned birth operation and ill and deformed children.

[Version 2: Article 20. Planned birth and medical health departments above the area [diqu] level must jointly form examination organisations or designate medical work units which are responsible for the examination of diseases caused both during the operation and by the operation as well as ill and disabled children]

Article 21. Planned birth statistics must be strictly carried out in accordance with the PRC statistic law. No work units or individuals should make false statements, falsify or alter statistical figures.

Article 22. All offices, work units and townships must practice the birth certificate system. Relevant procedures for planned birth will be managed by the work unit relating to the woman's residential certificate. The man's work unit should give active cooperation. If the woman is in the army, her birth certificate and single child certificate will both be held by the troop.

lp8l

Article 23. The planned birth work among the mobile population will be implemented and managed by the national planned birth management procedure for the mobile population.

[Version 2: Article 23. The planned birth work for the mobile population will be jointly managed by the People's Government of the place where the mobile population's normal registration booklets are kept and where they are temporarily living.

The People's Government and neighbourhood office of the villages (towns) where the normal registration booklets are kept must carry out planned birth propaganda education to the couples of childbearing age who left their normal residences and supervise them in implementing effective planned birth and contraceptive methods. In addition, they must have the couples produce planned birth certificates and be responsible for counting the children the couples have given birth to in other places.

The People's Government, neighbourhood offices, work units and organisations of the mobile couple's temporary residence must itemise the planned birth of the mobile population to their own management scope. The relevant departments must frequently examine the planned birth

certificates produced by the couple's normal residence to the childbearing population who apply for certificates for temporary residence, for boarding and accommodation [jizhuzheng] as well as for business. The departments should only give permission to those who observe the regulations.

Under the leadership of the People's Government of the same level, each level of the department of planned birth, public security, labour, personnel, industry and commerce administrative management, civil affairs, town and village construction, village and township industry, property and land management and transportation etc, must make a joint effort of do the planned birth management work of the mobile population well.]

Article 24. Contraceptive operations must be carried out by the specially trained medical technical personnel at medical work units which have good conditions. The operators must strictly carry out the routine for contraceptive operations and secure the safety of the patient. Individual operators [doctors] must not perform contraceptive operations.

#### Chapter 4. Rewards and Good Treatment

Article 25. Women [omitted in Version 2] workers from state offices, industries and work units (including contract workers) who practice late marriage and late birth and who have single child certificates will be given the benefit of longer maternity leave; cadres and workers who practise late marriage will enjoy an additional week of marriage leave.

Article 26. Cadres and workers (including contract workers) who have had contraceptive operations will be given the following holidays, subject to evidence produced by the hospitals at the county level or above:

(1) Three days off for the insertion of the contraceptive ring, plus one week off from heavy labour;

(2) 20 days off for the remedial method [i.e., abortion?];

(3) 23 days off for those who both adopt both the remedial method and the insertion of the contraceptive ring;

(4) 30 days off for having a tubal ligation of eggs (or sperm);

(5) 35 days off for both adopting the remedial method and having a tubal ligation of eggs (or sperm);

(6) 50 days off for inducing birth [yincan] in the middle of pregnancy;

lp9l

(7) 65 days for both inducing birth in the middle of pregnancy and having a tubal ligation of eggs (sperm).

Those who needed to be taken care of by their spouses must first get approval from the spouse's work unit after

the hospital produces evidence [of need]. During the period of care, the couple's salaries will still be paid.  
[This is paragraph 8 in Version 2]

Those who adopt the remedial method, have a tubal ligation and induce births in the middle of pregnancy must produce hospital certificates at the county level and above. During the month of the operation, 10 jin [Version 2: 5 jin] of first class powder (sticky rice), 2 jin [Version 2: 1 jin] of edible oils (butter oil) will be awarded.  
[This is paragraph 9 in Version 2]

Article 27. Han Chinese cadres and workers and family members who fall within one of the following categories and whose children are under 14 years of age can have a single child certificate approved:

- (1) Couples were able to conceive but volunteered to have only one child throughout their lives;
- (2) Couples who had only two children and did not want another after one died;
- (3) Couples in a second marriage where one member had only one child from the first marriage, and the other member had never given birth and never gave birth in the second marriage;

Article 28. Those who fall within one of the following categories will not be given a single child certificate:

- (1) Couples who originally had two children and gave one to others;
- (2) Couples in their second marriage who had only one child before the marriage and gave birth to another after this marriage;
- (3) Couples who each brought one child with them after divorce;
- (4) Couples who gave birth in a second marriage after a divorce where children of a previously marriage were legally assigned to the other partner and so did not bring any children to the second marriage;...

Note: the next page is missing from Version 1 and is only available in Version 2. Page 8, 3 lines from the bottom, to page 9, line 12 of Version 2 is equivalent to the missing page from Version 1.

- (5) *Couples with twins, triplets etc [duobaotai - more than two].*

Article 29. *Those who receive a single child certificate can enjoy the following treatment:*

- (1) *When awarding the single child certificate, 50 yuan rmb are awarded to the parents of the single child by the local area (city) planned birth department. The couple enjoys only half that amount if one member is in the army or the woman is in another province or town;*

(2) *From the date of the certificate until the child reaches 14 years of age, the couple is given five yuan in welfare payments per month. These payments are to be met half and half by the couples' work units. If one member of the couple does not have stable work then the other side will pay the entire amount;*

(3) *A single child enjoys priority arrangements with respect to entering kindergarten and going to hospital if other conditions are equal. They also enjoy advantageous arrangements with respect to enrollment at university, in factories and the army. They may also be given a work place nearer to their parents;*

(4) *Single children in Tibet may ask for repayment half and half from their parents' respective work units by producing receipts from kindergartens and hospitals. Those who enter kindergarten in mainland provinces and cities can still produce receipts for repayment if their fees are under 15 yuan per month. The amount above this figure must be met by the parents themselves;*

(5) *Those single [Chinese] children whose registration booklets are in Tibet and who are under the age of 14 are allowed reimbursement of travel expenses to and from holidays with their parents every year and a half, which is to be met half and half by the parents' work units. Their accommodation and luggage fees must be paid for themselves. No food subsidy will be issued. There is no travel reimbursement for tickets purchased at half price for sleeping seats. If one of the parents' registration booklets is in the mainland, when the child is going on vacation with the parents (every year and a half), half the travel expenses, welfare fees and medication fees will be reimbursed by the work units in Tibet;*

[end of missing page, back to Version 1 text]

[p11]

(6) *Where both parents' residential certificates are in Tibet, and the single child's residential certificates is in inland China, the couple's treatment is the same as those whose single child's certificate is in Tibet;*

(7) *Where couples who are Tibetan cadres and workers both volunteer to apply for the single child certificate, their treatment and conditions for the certificate will be the same as for Han Chinese cadres and workers. [Omitted in Version 2]*

Article 30. Children of minority cadres and workers such as Tibetans who comply with the planned birth regulations who leave the region for clinical treatment with the approval of the hospital and work units, will have their travel expenses and medical fees refunded half and half by the couple's work units upon the couple's providing the hospital receipts. Those units that practise the contract system for medical fees must give

the couple some supplementary fees according to the situation. The fees for the children to enter kindergarten will be shared half and half with the parents' work units. Expenses relating to personal consumption will not be reimbursed.

Article 31. Those who practise late births and who apply for a single child certificate within five months after the birth of the child will be allowed to have maternity leave for one year (calculating from the date of rest). The date closer to the date of leaving Tibet will be taken into the calculation [?] and no extra holidays will be given.

The first 6 months of maternity leave will be paid at the wife's full salary, the second 6 months at 65% of basic salary, professional salary, regional supplementary wage, and salary for the number of years worked. Other supplementary wages will be given as usual.

[Version 2 has the following extra sentence: *They should not be considered for any awards*]

All Tibetan and other minority cadres and workers who volunteer to have only two children throughout their lives and who guarantee that they will never give birth to a third baby will get four months holiday for each birth and will be given usual salary during the holiday.

[Version 2 has the following extra sentence at the end: *But they do not participate in any awards.*]

Ip12j

Article 32. When distributing hardship subsidies to help the poor, when conditions are similar, preference and better treatment will be given to poor families among the masses of peasants and nomads who practise planned birth. Those who volunteer to practise planned birth will be given appropriate awards where there are good conditions in the area.

[In place of the last sentence Version 2 has: *After the planned birth operation, the village government is responsible for giving an appropriate hygienic food subsidy.*]

## Chapter 5. Limitations and Punishment

Article 33. Han Chinese cadres and workers who work in Tibet and their families with residential certificates in the work units who gave birth outside the plan will be punished in the following way:

(1) For the first extra birth, an out of plan birth fee of 3,000 yuan will be charged. He (she) will be advised to have a sterilisation operation [Version 2 says: *he (she) will have a sterilisation operation*] and the woman will receive no salary during maternity leave (if the woman does not have a stable profession then the man will lose three months of his salary). Travel expenses to and from inland China to give birth and the fee for delivering the child in hospital will not be refunded. The mother will not enjoy the main and other food supply that normal childbearing women enjoy. Neither the husband nor the wife will benefit from any form of bonus including salary rewards for three years and they are not allowed to be promoted or to become model workers. Instead they will be given administrative punishment according to the situation. After the above treatment, they will arrange the procedures for the child to be

registered as entering the household (marked extra birth) after presenting proof from the work units' main responsible departments.

(2) For the second extra birth, a 5,000 yuan out of plan birth fee will be charged. Both couples will be demoted a grade, will receive no promotion for 6 years (neither professional title nor grade), cannot be awarded the title of advanced workers, cannot receive a bonus (including salary rewards) or the main and other food supply enjoyed by women of normal childbearing age. They cannot have their travel expenses to and from inland China for the birth and their hospital fees refunded. One member of the couple will be ordered to have a sterilisation operation and be given administrative punishment. After this treatment, the main responsible department of the work unit will produce proof to allow for to arrange the procedure for entering the child in the household (registered as an extra birth).

Ip13j

(3) The extra birth fee can be levied all at once or by instalments within a year. Those who do not pay the money within that time will have 60% deducted from their salary each month until the sum is paid.

(4) Before the age of six, the extra child will only be supplied food and oils at cost (i.e., without discount or benefit of government ration cards) and their medical fees, kindergarten fees and travel expenses including those of people accompanying them will not be refunded.

(5) Upon the death of the extra child, the extra birth penalty fee will not be refunded, and they will not be allowed to have another child [Version 2 does not include the phrase after "refunded"] The punishment of 'no promotion, no raise, no award of advanced worker status' will be lifted beginning in the month of the child's death.

(6) Persons with the single child certificate who have an extra birth will have all the advantageous treatment they have already enjoyed traced back and stopped and they will be punished according to relevant regulations. Those who have already enjoyed one year's maternity leave will have four months' wages deducted from the woman's salary (including the basic salary, professional salary, regional subsidies and working year wages) [phrase in parentheses omitted in Version 2].

Article 34. Tibetans and other minority cadres and workers within the region who have extra births will be given the following punishments:

(1) For the first extra birth, a penalty fee of 500 yuan will be charged as an extra birth fee (if one member of the couple does not have a stable profession the fee is 300 yuan), and for two years neither member of the couple is allowed a



promotion, raise, or bonus (including salary awards).

(2) For the second extra birth, a sum of 1,000 yuan extra birth fee ...

[Note: the next page in Version 1 is missing and the text is only available from Version 2, page 11, 7 lines from the bottom:]

...will be charged (if one member of the couple has no stable profession then 600 yuan will be charged). For three years neither member of the couple will be promoted, be given a raise, or enjoy a bonus (including a salary award) and should not be awarded the status of advanced workers. One member of the couple is also advised to have a sterilisation operation.

(3) After the above treatment, the procedure for entering the household registration booklets according to evidence is arranged (labelled an extra birth). Before the extra birth child reaches the age of 6, grains and oils should be supplied only at cost.

Article 35. If both parties are township residents, for the first extra birth, before the child reach the age of 6, grains and oils will only be supplied at cost; for the second extra birth another 300 yuan extra-plan birth fee is charged and one member of the couple is advised to have a sterilisation operation.

Article 36. When a couple complies with birth regulations, but violates the rules requiring intervals between births it is called a rushed birth [qiangsheng]. Those Chinese and Tibetan cadres and workers who give birth without reaching the age of late birth will be treated as having a rushed birth. The local planned birth department will first levy the rushed birth fee, then arrange the birth certificates. If the child dies before the arrangement of entering the household registration booklet, then the birth certificate will be handed in to the main responsible departments to be registered [rendered?] useless.

(1) The first rushed birth of Chinese cadres and workers and their relatives will be charged a rushed birth fee of 150 yuan, and the second a fee of 500 yuan.

(2) The rushed birth of Tibetan and other minority cadres, workers and relatives whose registration booklets are at the work units will be charged 150 yuan.

Article 37. For an illegitimate birth or a birth before the legal age of marriage, travel expenses to and from the mainland for the birth will not be reimbursed. Half the couple's total salary will be deducted in the month of the child's birth and the work units will give the necessary administrative punishment. The couple will not enjoy the main and other food supply normally provided at the time of the birth. The couple will be treated as having a rushed birth [qiangsheng].

[p15]

Article 38. Those who become pregnant within the region can only be given a birth certificate to have the child registered in their household by providing three items of proof (a witness, the local police station and

work units of the people concerned, or the local neighbourhood committee. Otherwise they will be treated as having an extra birth. Those who become pregnant outside our region will not be given a birth certificate allowing for household registration of the child in our region.

Article 39. Those family members who went to Tibet to join the cadres and workers to give birth must have a birth certificate issued by their original hometown. For a first birth without a birth certificate a couple will be charged 500 yuan; for a second birth the couple will be charged 1,000 yuan and one member of the couple will be required to undergo a sterilisation operation. Additional punishment will be imposed after the second birth; starting from the month the child is born, each month 50 yuan will be deducted from the man's salary until the Party who has no residential certificate leaves Tibet. The penalty will be levied by the work unit to which they belong, and the work unit will also have to inform the planned birth department that the woman's residential certificate is in. Our region does not arrange birth certificates.

Article 40. [Version 2 begins: Article 40: Detailed regulations for the arrangement of planned birth among the mobile population [floating population] must be carried out according to the planned birth management methods of the national floating population.] Mobile personnel who do not hold birth certificates issued from their original place [of residence] and give birth in our region will be charged 8,000 yuan. Those who have a second birth will not only be charged the penalty but also one member of the couple will be ordered to be sterilised. If not, the industry and commerce administration department will invalidate their business certificates, the public security department will cancel their temporary residence certificates, order them back to their place of origin and inform the planned birth department there.

[p16]

Article 41. [Version 2 begins: Planned birth personnel and ...] Citizens who behave in one of the following ways will be given administrative punishment, and those whose behaviour constitutes a crime will be identified as criminal responsible by the legal department:

(1) Neglecting their duty, making false statements, favouring friends or relatives, corrupting and violating the law and discipline;

(2) Taking bribes and using the planned birth fund;

(3) Without approval, examining the child's sex, removing contraceptive equipment for others, reconnecting tubes that transport eggs (sperm) for others and performing a contraceptive operation against the rules, thus causing an accident;

(4) Falsifying, changing or selling a relevant certificate/document relating to planned birth;

(5) Hindering planned birth workers in carrying out public affairs, violating and endangering the

security of the person, family and property of planned birth workers;

(6) Deserting or harming infants, or maltreating women who have given birth to female infants;

(7) Doing anything else which violates planned birth.

## Chapter 6. Income and Expenditure of Funds

Article 42. Each level of the People's Government must put the planned birth fund into their local financial budget. Industrial and other work units must also arrange the necessary fund, and provide the conditions required to guarantee the smooth development of planned birth work. Each level of the planned birth department must make expenditures for this cause a special concern, and use the special funds for special purposes only.

[p17]

Article 43. The expenses to be reimbursed for the single child in state-owned industries and other work units can come separately from the remaining interests [*lirunliucheng*] and welfare funds. If these are insufficient the money can come from the business management fee or enterprise fees. Regarding state organs, the money will come from the welfare fee, and if that is insufficient, from the administration fee.

Article 44. The extra birth fee will be levied by the work units to which the couples belong. It will be managed as a separate item of account. 50% of this will be left in the local work units to use on kindergartens, supplementary expenditure of planned birth propaganda, and single child welfare fees. The other 50% will be given to the finance department at the higher level.

40% of the extra birth fee from the mobile population will be left with the management department as a management fee, 60% will be given to the main responsible department of the area (city) to use on the mobile population planned birth management fee.

Article 45. The extra birth [*qiangsheng*] fee will be levied by the local area (city) planned birth department and added to the planned birth enterprise fee.

## Chapter 7. Attachment

Article 46. Planned birth regulations for the troops in Tibet will be based on the above regulations. In places where the relevant rules of this method are not the same

as the planned birth regulations in the army, the rules of the army will apply. Planned birth for the Tibetan offices in inland China will be carried out according to the local rules.

[Version 2: Article 46. *The planned birth management of the mobile population will be led by the planned birth department, who together with the departments of public security, industry and commercial administrative management, city construction, civil affairs, health and property and land management, manage and implement The Management Methods of Mobile Population planned birth drafted and issued by the state planned birth commission.*]

Article 47. This method will be carried out from the day of announcement. [Version 2: Article 47. *The planned birth of the peasants and nomadic masses in the heart of the agricultural and nomadic areas will begin with propaganda and test work, then gradually grow as conditions are ripe.*]

Article 48. The Autonomous Region Planned Birth Leading Group will be responsible for a detailed explanation of this method.

[Version 2: Article 48 is the same as Article 46 of Version 1]

Article 49. All relevant previously proclaimed regulations on planned birth will be disregarded from the date of this method's proclamation. This method become effective from the date of its issuance.

[This is substantively the same as Version 2, Article 47]

Article 50. All detailed questions arising while carrying out this method will be explained by the Autonomous Region's primarily responsible administrative planned birth department.

[Version 2 ends here]

Copies of this report to: State Planned Birth Committee, TAR Party Committee, TAR People's Government, TAR People's Congress, TAR Political Consultative Committee, Tibet Military Region

Copies to: TAR Party Committee Discipline and Inspection Committee, TAR Supreme Court, Procuratorial Court

cc: members of the Autonomous Region Population and Planned Birth Leading Group

Print run: total 400 copies

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[End of TIN Docs. 1(XL/18)(YB)]

## TAR Health Report for 1991 (TIN Doc. 10(XB))

### Tsering Drolkar's Speech at the Regional Health Meeting

Date Written: February 1992

#### Introduction

This document is concerned with health provision in the TAR, and does not discuss birth control. It is included here for reference purposes, and to provide a comparison by showing the workings of another government department. This document (TIN Doc.10(XB)) contains the text of a report on "Regional Health Work in 1992" given by Tsering Drolkar, Director of the Health Department in the TAR, to the Regional Health Work Meeting of February 1992. The original in TIN's possession was printed in Chinese characters on 10 pages.

The report reviews the work of the Health Department throughout the TAR during 1991. The majority of the report - approximately two-thirds - describes achievements or "major breakthroughs in health work" in 1991. The remainder outlines future plans for health care in the region.

The "breakthroughs" described by Tsering Drolkar are improvements made in health care in agricultural and nomadic areas of the TAR. These the establishment of 44 new health stations at the level of the *xiang* (a "township" or group of villages). 136 new doctors were trained and 1,036 village and *xiang* doctors were also retrained under the health programme for rural areas.

Progress in women's and infant's health work was also described. This included the training of 46 women and infant health workers at county level in cooperation with UNICEF and the UN Population Fund.

The efforts being made to promote and develop Tibetan medicine were particularly emphasised. In her report Tsering Drolkar referred to a special fund worth 1 million yuan for the development of Tibetan medicine and to two other special funds to be used in the construction of the Regional Tibetan

Hospital and the Lhokha area Tibetan hospital. She also described various initiatives taken to promote the study, understanding and use of Tibetan medicine.

The issue of free medical treatment was also raised in the report. Tsering Drolkar described it as a special benefit given to Tibetans by the central government. However, she acknowledged that funds were restricted and that in order to maintain the system of free medicine each area needed to "start to collect funds to run hospitals with voluntary donations". The collection of these donations and the administration of free medical treatment funds differs from county to county, and it appears that in some cases the "voluntary donations" are actually fees charged to patients for treatment.

Charges for medical items appear to be set centrally by the Department of Health together with the Department of Finance and Price Bureau. During 1991 these charges were reviewed and the prices of around 1,100 items were raised.

Because of the free medication system operating in the TAR, Tsering Drolkar anticipated that health costs in the region would rise above the national average. To meet these costs and to further develop health care in the TAR, she proposed that a plan for state-funded medication reform should be drawn up in 1992.

Improvements to health care in agricultural and nomadic areas were the other main plans for the future outlined in the report. Again the emphasis was placed on construction of *xiang* health stations. A total of 300 health centres were planned for 1992 and 1993. Areas and counties able to raise funds to cover basic construction costs and acquire personnel were to be given priority.

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### Director Cirenzhuga's [Tsering Drolkar's] Report On Regional Health Work in 1992 A Document of the Regional Health Work Meeting, 1992

(February, 1992)

Comrades: Today the 1992 Regional Health Work Meeting has opened. This meeting is held under the spiritual guidance of the Eighth Meeting of the 13th Session of the Party and the Third Enlarged Meeting of the Fourth Session of the Meeting of the Regional Party Committee.

There are three major items for discussions at the meeting:

[1] conveying and carrying out the spirit of the 1992 national health work meeting and the telephone conference on Chinese medicine;

[2] summarising 1991 health work plus studying and organising 1992 regional health work;

[3] summarising the three years of rectification and development [*zhengkai*] activities and rewarding the civilised work units and individuals for *zhengkai* activity in 1991.

Now I will give a report to the meeting on behalf of the Health Department. Please discuss.

#### Part 1 Major Breakthroughs in Health Work in 1991

In 1991, the broad masses of health workers in our region conscientiously held the Seventh Meeting of the 13th Session of the Party and the Meeting of the National Directors of Health Departments. The meeting focused on economic construction, stuck to the party's four basic principles and the Reform and Open Door Policy, and made an effort to build a socialist health system with Tibetan characteristics.

Implementation of the two strategic key points of health work in the agricultural and nomadic areas, preventive medicine and health care, continued. [In addition,] the health workers launched *zhengkai* activities, strengthened their work style and enforced clean politics. All aspects of health work were developed anew, a good start was made, and a foundation was laid



for implementing the regional health Eighth Five-year Plan and the Ten-Year Plan for the decade up to the year 2000.

### (1) Success in the Areas of Agriculture and Animal Husbandry.

Last March, the Second Regional Agricultural and Nomadic Areas Health Work Meeting was held with the agreement of the TAR Government. Proposals were discussed to strengthen health work in the agricultural and nomadic areas as well as in preventive work and health care. [Participants also] discussed and drafted Tibet's Eighth Five-year Plan Health Policy and plans for the ten years to the year 2000.

In order to carry out the spirit of Document No.4 (1991), the health departments, along with the Economic Planning Committee and the Department of Finance, conveyed their opinions on the reform and strengthening of health work in agricultural and nomadic areas. The 'opinions' put forward methods of strengthening health policy in agricultural and nomadic areas in the following three ways:

- [1] setting up three levels of a health network;
- [2] building health technology teams;
- [3] strengthening leadership at each level of government.

#### 1. We have further strengthened the basic work units' health organisations in the agricultural and nomadic areas:

Last year, each level of government and health department undertook as an important task the construction of *xiang* [townships/groups of villages] health stations. The Autonomous Region arranged for a special fund of 680,000 yuan for the *xiang* and town health stations. [original not clear] Through collecting money in a variety of ways, 93.4% of the *xiangs* established health stations [weishengyuan].

In the Rikeze [Shigatse] areas, people adopted the method of the area [qu] and county investing to build *xiang* health stations, with the *xiang* governments also donating and the masses contributing money, labour or materials. In Jiangzi county, the *xiang*-level health station was built [solely] by donations from the masses.

In the Linzhi [Nyingtri/Kongpo] area, the people actively and carefully experimented by reforming the *xiang* health station management system. First they summarised the experience of the first five *xiang* and counties sharing management, for which the *xiang* were mainly responsible. Last year, the Linzhi people extended this [system] to an additional 20 *xiang*.

This [arrangement] changed the former system, which had focused on management by 'stripes' [tiaoj]. The new management system works

through a combination of 'stripes' and 'lump' [kua] but with 'lump' as the main part [stripe refers to vertical or top-down line management, and lump refers to horizontal relations or networked management - translator's note]. In addition, this changes the previous situation where only the health department actively promoted health policy. Now, both the health departments and the *xiang* governments do so.

The village [cun] level health organisation is the basis of health work in our region and [its work has provided each area with rich experiences]. Village Doctor Badouji [Ba Dorje?] from Quxia village, Jiangdang *xiang*, Rikeze [Shigatse] city, was one of those [who have helped]. Doctor Badouji used his own money to pay workers and buy materials to build a village health centre, and to provide medical equipment and medicines to treat the villagers free of charge. [For these actions,] Doctor Badouji was praised by the Health Ministry and relevant departments in the Autonomous Region and Rikeze.

Correctly solving the village doctors' problems in giving treatment is an important means of stabilising the village and *xiang* doctors' team and strengthening agricultural and nomadic areas' health work. Last January, with the agreement of the Regional Party Committee and the government, the living expenses subsidy for the village and *xiang* doctors was raised by 10 yuan per month to 30-40 yuan per person per month. In Linzhou [Lhundrup], Dazi [Taktse] and Qushu [Chushu], through collecting donations, the salaries of village and *xiang* doctors have been raised to 60-120 yuan [per month]. This has greatly strengthened the enthusiasm of the village and district [xiang] doctors and strengthened their sense of responsibility.

In 1991, through the effort of both the government and the health department, there was an increase in the whole region during 1990 of 44 *xiang* health stations, plus 182 medical staffers and 54 beds. In the course of the construction of the *xiang* health stations, the directors of Chamdo and Naqu *xiang* health stations were awarded the rank of advanced director by the Health Ministry.

#### 2. We are training practical health staff for the agricultural and nomadic areas:

Each area and county adopted numerous methods to carry out the retraining of 1,036 village and *xiang* doctors and medical personnel. They also trained 136 new doctors. Rikeze and others co-operated with friendly organisations abroad and attracted foreign funds for the training of health staff for the local basic work units.

3. We are gradually creating [?] medical health units above the level of city and district [xiang] to help and support health units in the agricultural and nomadic areas:

The medical health units of the Autonomous Region and the cities secured their respective support units and sent out medical teams to help the units train technical staff, solve technical problems, improve management and transfer equipment free of charge.

## (2) Further Realisation of Preventive and Health Care Strategy.

After examination by immunisation planning experts, it is confirmed that our region has met the target of 85% immunisation, using the county as the unit. Compared to 1990, in 1991 the disease of *bairike* [a disease common among children, possibly whooping cough] was cut by 92.3%, and the death rate by 75%. There were no reported cases of 'white throat' [*? baihou*] or new-born baby tetanus [*xinsheng pe shangfeng*].

In October, to secure this result, the Second Regional Meeting to exchange experiences on reaching the 85% target was held to reward a group of advanced work units and individuals who had done the work well. The meeting also put forward the following tasks: [(1)] during the eighth five-year plan [*simiao quancheng jiezong lu*] to meet the target of 85% immunisation of four injections using the *xiang* as the unit, and [(2)] basically to destroy "spine going grey" [a disease in which the bones become soft and brittle - *jisuihuizhiyan*] in 1993.

We are making an effort to strengthen the prevention and cure work on contagious and local diseases:

According to the report covering [the period] January-October, there were 16,328 cases of fourteen contagious diseases (A & B), and 120 deaths. Compared to the same period in 1990, the rate of illness was down by 7.92%, and deaths by 31.43%. Last year, [however], plague was more common than in recent years. Altogether there were eight outbreaks, among them two in the human world in which there were 21 cases and 10 deaths, and, for the first time, plague was found among both people and animals in Shannan. The area committee [*diwei*] and the headquarters [*xingshu*] paid a lot of attention to [these facts] and decided to establish anti-plague systems. They have solved the staffing problem.

We are actively organising and launching patriotic health movements:

This year the Autonomous Region's Patriotic Health Meeting organised two regional patriotic health movements. The Director of the Regional Patriotic Health Meeting, Jipu Pingcuodeng [Gyipu Phuntsog Tseten], gave a speech on television to mobilise the participation of the entire society. According to calculations, nearly 100,000 people in the whole region joined in this activity and cleaned up 15,000

tons of rubbish, completely changing the appearance of the region's cities.

Each level of government strengthened [its] leadership over women's and infants' health work. The Regional Work Meeting on Co-operation on Women's and Infants' Health was held to realise the spirits of the [following] two documents: "The World Declaration on the Preservation, Protection and Development of Children" and "The Action Plan for the 1990s".

The Autonomous Region Government approved and amended the strategy for the year 2000 and the Eighth Five Year Plan drawn up by the Health Department in order to promote the complete development of women's and infants' health work in our region. Last year, a special fund was set up with 1.2mn yuan from the Autonomous Region and 750,000 yuan from the Health Department to develop work in women's and infants' health.

Co-operation in regard to women and infants progressed smoothly. Complete sets of funds have already been basically set up for each county project with the district.

The first session of training work with the UNICEF and the UN Population Foundation has already been completed. Altogether 46 women and infant health workers at the county level and 400 village doctors were trained. Since 1990, in 16 county projects, appropriate medical equipment was provided to the county women's welfare stations, district [*xiang*] and village [*cun*] health organisations.

## (3) Great Development of the Cause of Tibetan Medicine and Tibetan Medicine Itself.

In each area, people gave sufficient emphasis to learning and developing Tibetan medicine. In our department, we drafted the Eighth Five Year Plan and plans for the year 2000 for further development. The Autonomous Region has arranged one million yuan worth of special funds to be used to help develop Tibetan medicine. There are 165 [additional] professionals in Tibetan medicine and [an additional] 34 beds in the whole region. With the support of the state Chinese Medicine Management Bureau, the Regional Centre for Tibetan Medicine Training was established.

Much effort has been made to carry on and develop the legacy of Tibetan medicine which has gained remarkable success. The Tibetan version of the Tibetan section of the Chinese Medical Encyclopedia, jointly written by Tibetan medical experts in our region and in Qinghai and Gansu, was completed and published. Last year, in the whole region six old Tibetan doctors took on students and a very grand meeting of initiation was held.

In August, the regional Tibetan hospital held the fifth examination in Tibetan medicine which encouraged Tibetan medical staff to study their profession. Last year, the regional Tibetan hospital and Shannan [Lhokha] area Tibetan hospital were listed as key construction items in the state Chinese Medicine Management Bureau's "Apricot Forest Plan" [*xinglin jihua*]. The special funds for the two Tibetan hospitals have already been basically set up and a model Chinese medicine hospital for the whole country will be built in two years.

Last year, the regional and area Tibetan hospitals continued to send medical teams to the peasants and nomads to give [them] complete medical treatment, [a practice] which was popular with the masses of peasants and nomads. In order to give the benefits of Tibetan medicine to inland patients [i.e. patients in China proper], a Tibetan medicine section was jointly established in Chengdu by the Tibetan Chengban hospital and the Regional Tibetan Hospital. [The section] was warmly welcomed by all the brother nationalities. In addition, last year the Autonomous Region Tibetan Hospital was also awarded the state's advanced "green unit" by the relevant departments.

The quality of Tibetan medicine has constantly risen. The "70 tastes of the pearl" [*zenzhu qishi wei*] produced by the medical factory of the Regional Tibetan Hospital was awarded the honourable "Great Wall Cup" at the International Traditional Medicine Meeting held in Beijing. At the Guangzhou Fair, the "70 tastes of pearl" [*changjue* - sic] and *yuningniar* [name of Tibetan medicine in Tibetan] were awarded gold cups.

Developing Tibetan medicine with the support of scientific and technological progress and development:

Last September, the Regional Academic Conference on Tibetan and Natural Medicine was held. Twenty-nine essays were circulated during the meeting. The first phase of work on the use of "red view sky" [*hong jingtian*], Tibetan medicine, [a] joint investigation [by the Regional Tibetan Hospital and the West China [*huaxi*] Medicine College, has been successfully completed. Work [is now] moving to the second stage, that of clinical experiments.

The article "Computer Software Application in Studies to Calculate the Astronomical Calendar [*dianzi jicuanji ruanjian zai tianwen lixuan zhong de yingyong* - sic]" was awarded third prize for regional, scientific and technological advancement. This item of technology applied modern computer calculation to the traditional method of manual calculation.

Through developing Tibetan medicine, a large number of advanced Tibetan workers are emerging. [For

example,] Qiangbachile [Lobsang Thrinley], the famous Tibetan medical expert, was elected vice-chairman of the China Science Association last year, the only minority cadre among the leading cadres in this organisation.

#### (4) Achievements in Management [and] Rectification and Deepening of Reform.

Last year was the third year of the "programme for rectifying medical health organisations and starting civilised quality services" in the regional health services.

According to the general plan, the key point was the implementation of the rules and regulations of the medical health units above the area and city levels and targeting the basic management of the medical health units at the county level or below. We must continue to develop and establish civilised work units, civilised scientific offices and civilised workers.

To promote the healthy development of "rectification and development" [*zhengkai*], in August our department in Jiangzi held an on-the-spot meeting where experiences were shared. The Health Department and each city and area frequently send people to the basic units to guide work. Through three years of "rectification and development", the professional style and working order of each level of medical health units has changed dramatically and social and economic interests also improved. From this activity, many civilised work units and individuals emerged. During this [?] meeting we will praise their advanced deeds. There is separate material on this aspect of [our] work so I will not duplicate it [here].

Last year, [in order] to implement an active and stable reform in the medical welfare system, the Leading Group for Reform of the System of Public-funded Medical Treatment and its functioning body [*banshi jigou*], with comrade Jipu Pingcuodieng [Kyio Phuntsog Tseten], the Vice-Chairman of the region, as group leader, was established. [The Leading Group] drafted the management procedure for public-funded medical treatment in our region.

Naqu, Linzhi, Shannan [Nagchu, Kongpo, Lhokha] and others have made practical changes to their public funded- medical system to adapt to their local reality. They allocated the public-funded medical fee to the units that enjoy public medical funds. [Then] the medical units, when giving treatments, charged fees according to costs so that waste was reduced and expenditures restricted.

Free medical treatment is a special benefit which the central authorities give to Tibetans. Funds are very tight, however, and the peasant and nomad masses get very little real benefit. To supplement funds for



free medical treatment and improve medicine in the basic units, according to the spirit of "Suggestions for the Ten-Year Plan and the Eighth Five-year Plan for National Economic and Social Development" put forward by the Regional Party Committee, last year our departments sent out an "announcement on collecting funds to run medical testing work units". This demanded that each area "start to collect funds to run hospitals with voluntary donations, so this is not actually changing the present free medical system".

With the support of each level of people's congress and government, there was good development in collecting funds to run hospitals (co-operative hospitals, that is) in each area for the year. In Linzhou [Lhundrup] county the people's congress decided to collect funds to run hospitals in the whole county and collected 110,000 yuan to buy medicine for the peasants and nomads. In Linzhi [Nyingtri] area they strengthened the management of free medical treatment and changed the free medical treatment fund from a secret supplement [*anbu*] to an open supplement [*mingbu*].

In Milin county in Linzhi [Nyingtri/Kongpo] area they allocated 60% of the free medical treatment fund to the *xiang* government to manage. Forty percent was left to the county hospital. The peasants and nomads will have their medical fees cut by 70% when they go for treatment in their local *xiang* offices, and pay 30% themselves. In Linzhi county they gave the entire free medical treatment fund to the *xiang* government. When the masses go to the county hospital for treatment, they will be charged (as follows). For a special examination the price will be half and if they take the receipt to their own *xiang* government, 25% will be refunded. The other 25% they pay themselves.

These experiences in different areas reflect the basic health policy of "mobilising the whole of society to participate", "people's health run by the people", and "running health work well for the benefit of the people".

In Lhasa, the health reform is constantly being deepened. In 1987, the municipal health bureau started to promote a "target management responsibility system" throughout the health organisation in the city. Each level of Health Administrative Department signed responsibility contracts with its subordinate medical health unit, level by level. The contracts covered nine aspects and 250 items.

We are gradually completing the medical service compensation system:

Last year, our departments, along with the department of finance and the price bureau, reorganised and rectified the medical charges standard in force since 1981. They lowered prices for medical items which

were too high, and appropriately raised the prices of around 1,100 items which were too low. Meanwhile, the charge for foreigners' medical treatment was adjusted. The average rise was 20-30%.

#### (5) We are further strengthening the application of the law to health.

The careful implementation of the food health law.

In order to secure the smooth celebration of the 40th anniversary of the peaceful liberation of Tibet, the food health supervisors in our region carried out, according to the law, the supervision and examination of the state-owned, collective-owned and individually-owned food and drink services. They also correctly handled infringements of the law.

Cans of out-dated drinks numbering 5,685 belonging to the Rikeze [Shigatse] area commerce company were destroyed. The department of supervision over the administration of medicine solved a case which involved smuggling false Tibetan medicine. The medical examination department in our office in Lhasa chaired the meeting on co-operation in medicine examination in the southwest regions. The Medicine Administration Bureau of our Department has finished examining 180 types of medicine. In the course of preventing infectious diseases, they carefully carried out the rules set out in the law on the prevention and treatment of infectious diseases, effectively controlling the occurrence and spread of plague.

Our departments also drafted the "Rules for the Prevention and Treatment of Plague in Tibet (draft)" and the "Emergency Treatment Plan for Plague Infecting Humans in Tibet (draft)", and reported them to higher government levels for examination. The quarantine offices at ports carefully carried out the "PRC State Border Health Quarantine Law", thus preventing the import and export of diseases.

Last year, the Zhangmu quarantine station discovered eight patients with "number two diseases" among travellers from Nepal. They found them in time to isolate them and prevent the spread of disease. This station also examined quarantine procedures for the one million or so people crossing the border and checked the hundreds of tons of imported food. They discovered ten tons of below-standard food which they sent back.

The Lhasa Air Quarantine Station sterilised 82 planes landing and taking off, as well as treating 9,183 patients crossing the border. They physically examined, immunised and signed immunisation certificates for 560 Chinese and foreign travellers.

## **(6) The constant enlargement of external co-operation and exchanges.**

In recent years, foreign affairs workers in our region have carefully carried out and implemented the broad and open spirit advocated by the central authorities, started many wider forms of external co-operation and exchange, and made remarkable achievements. We enlarged and strengthened co-operation with the UN Children's Foundation (UNICEF) and other international organisations.

We imported 100 vehicles of different kinds, from organisations offering assistance free of charge: 71 went to the medical organisation, [and] 29 to the women and infants and planned birth organisations. This greatly improved the backward situation in transport for the medical health units in our region.

Meanwhile, we introduced into Tibet a large amount of relatively advanced medical equipment. Each level of the Red Cross in our region has a very active function in attracting foreign capital to train basic unit health personnel. The Rikeze [Shigatse] Red Cross and the Tibet Aid Development Fund co-operated with the Swiss Red Cross and has held nine training sessions for village doctors since March 1988. So far they have trained 261 village doctors, each session lasting three months. The first round of training is scheduled to finish this May.

The two associations also established the Bianxiong Tibetan medical school in which 40 sons and daughters of peasants and nomads have already received six years of education in Tibetan medicine. In the last four years, our region has accepted altogether 3.347 million yuan of assistance funds from the Swiss Red Cross.

We have also signed many letters of intent on health co-operation with official or non-official organisations such as the Doctors' Associations Without Boundary [*wuguojie yisheng zhuzhi* - Medecins Sans Frontiers] in Japan, Italy, Belgium, Britain and France. In 1991, we also made arrangements for visiting personnel and have created conditions for widening external co-operation and exchanges.

## **(7) We are gradually strengthening the ideological and political work in the health apparatus.**

Each health department in every area closely associated the international with the domestic situation, carrying out widespread propaganda on opposing 'peaceful evolution' with education on socialism, patriotism, the Marxist view on nationality, and religion. We must make an effort to strengthen the ideological, organisational and construction style of the party. We must carry out the daily routine of

ideological political work well. On the eve of celebrating the 40th anniversary of the peaceful liberation of Tibet, each medical health unit in Lhasa area has started the activity of 'welcoming Daging, promoting the two studies and civilised good quality service month'.

In some provinces and cities in south China last year there were huge flood disasters, and each of the nationalities among medical workers in our region elaborated the spirit of "if one has difficulty, eight aspects will help [*yifang younan, bafangzhiyuan*]" to donate money to the people in need. The health departments' direct leading work units themselves donated 17,521.70 yuan, and 860 *jin* [Chinese measurement] worth of food tickets. Each level of the health department combined ideological political work with starting these useful activities and thus has done the ideological political work in a colourful way.

While sufficiently recognising the achievements in last year's health work, we must also realise the existing problems and difficulties we are facing. The relationship of health work and economic construction and its importance have not been sufficiently acknowledged; health reform lacks policy guidance; there are still weak points in the internal management and ongoing system of the health departments; the quality of service still had some problems; health investment was not sufficient; repairing the three levels of the medical health network in the peasant and nomadic areas was still quite a heavy task; there was a high rate of infectious and local diseases; the masses' consciousness of welfare and their ability to handle it was relatively low; there is a lack of manpower in basic health units and the quality of manpower needed raising. All these questions need to be addressed in future work.

## **Part 2. We Must Carefully Acknowledge the Nature of Health Care, Defining the Direction of the Development of Health Care in our Region.**

From the beginning of the 1950's, health care has been defined as "the people's welfare", and a series of measures which reflected the beneficial nature of health care has been subsequently drafted. Health care in Tibet was even more welfare-oriented. For example, it provided publicly-funded medical treatment to the cadres and workers and gave free medication to the masses.

However, we must also see the disadvantages and problems brought about by this system, especially when our country is still at the initial stage of socialism, and the economy and culture are relatively undeveloped. It is practically impossible for the country to pay for all medical care, to treat health care as pure welfare, and even if in future the country got richer it would still be difficult for the state to be completely responsible.

Since the party's third session of the 11th congress of the party, the health department has carefully discussed

the nature of socialist health care. In March 1990, comrade Li Tiejing, a member of the State Council, after carefully analysing the characteristics of socialist health care in our country, summarised the nature of the present stage of health care in our country as "welfare-type care combined with public benefit".

This notion combined the characteristic of public interest with the nature of welfare, and in theory has broken through the notion of the simple and narrow view of "welfare" in the past. It fits in with the economy and culture at the present stage and is beneficial to the development of health care. It also fits with the reality of Tibet.

There are two aspects of this characteristic, but they are also one organic body. One is the welfare aspect: this is determined by the public ownership of the production materials in the socialist state. This has kept continuity with past notions and regulated the development direction of our health care, which is to further raise the standards of welfare. The welfare characteristic of health care determines that state investment in health care must be the main channel.

The department of health states that by the end of the century, it expects that national health care costs will be above 4% of total state financial expenditure; above 6% at the level of province and city; and above 8% at the level of city and county. In our region, because of the free medication system, the ratio of financial expenditure will be even higher than the above set target.

Second, the aspect of public benefit determines that "people run health care, and health care must be for the benefit of the people". This is also one of the basic notions of our health policy, "mobilising the whole society to participate". In recent years, the masses collectively donated money to run co-operative hospitals for the peasant and nomadic areas in our region. This shows the element of public benefit. All cities and areas must carefully summarise their experience of this aspect and gradually promote it.

The development of health care in our region demands the continuous deepening of the health reform. Director Chen Minzhang pointed out in this year's national health work meeting: "The key to realising the development target of 1990s health work is to firmly practise reform and the open door policy. The development of health must be led by health reform throughout health development. We must use the spirit of reform to solve questions in health development."

The whole procedure of health reform and development in our region must keep to the purpose of serving the health of the people. It must also keep to the principle of public ownership as the main trend, so that the socialist health system can improve itself. The key to health reform is reform in how the state pays for the health system. This year we must make an effort to produce a plan for state-funded medication reform.

Free medication is a special medical welfare component that the central government designed for the masses in our region. Although there are problems, the scope of its influence is big. Consequently the difficulty of reform is very big. Therefore, without changing the present free

medication system, the health department must emphasise strengthening management, filling in loopholes and improving results. This year, the health department must co-operate with the department of finance and prices to continue to adjust the price levels set by the health department.

In March 1988, with the approval of the Autonomous Region Government, at the first regional agricultural and nomadic areas health work meeting it was decided that the Autonomous Region People's Hospital, the Lhasa Municipal Hospital and the Shannan Area People's Hospital should take the lead in practising the director responsibility system. In the past three years, these hospitals have stuck to the principle of "keeping to the socialist road and serving the health of the people".

They have remarkably raised their social and economic results as well as the quality of medication. They have obviously changed their attitude to service, opened wider their horizons, and provided precious experience for health reform in our region. The reform in the three hospitals was greatly supported by the relevant departments in the Autonomous Region such as the finance department. Document No.5 (89) issued by the Tibetan Regional Department of Finance played a very big part in raising the level of enthusiasm of the hospitals and the medical staff. This document must be implemented before the new hospital accountant system is put in place.

I hope these three hospitals continuously and carefully summarise their experience and constantly deepen the health reform. Meanwhile we demand that each level of medical health work unit fully promotes the system of director responsibility alongside the leadership of the party committee.

This year we must stabilise the results achieved by management and rectification in city health work. We must increase the elements of reform, strengthen internal management, complete the disciplinary [yueshu] mechanism, and further deepen the health reform. We must actively and steadily carry out the testing work of management of hospitals level by level. One or two hospitals above the area and city level will be chosen as models, according to relevant demand, and their experiences will be published later on.

### Part 3. The Main Task for 1992 Health Work.

In 1992, each level of health department must carefully carry out the spirit of the Central [Authority's] Work Meeting, the Eighth Session of the 13th Congress of the Party and the Third Enlarged Meeting of the Full Committee of the Fourth Session of the Regional Party Committee. They must securely establish and serve the idea of economic construction as the centre and actively participate in the education of socialism in the countryside.

We must carefully implement each item in the target set by the eighth five year plan and the health care plan for the year 2000 in our region. We must secure and develop the results of administrative re-organisation, further deepening the health reform. The key point is to strengthen health, preventive health care, medical



education and technology, and Tibetan medication work in the agricultural and nomadic areas.

We must strengthen ideological and political work, and correct mistakes. We must continue to improve and implement each type of management method and disciplinary mechanism to promote the constant development of health care.

The task for work in 1992 is already emphasised in "key points of work in regional health work in 1992". Each relevant professional office in the health department has also set out arrangements and made demands for the main professional work to be carried out according to these key points for work. Please bear in mind the realities in local areas and your own work units and carefully study and carry these out.

Here I have a few more points to emphasise for reference by my comrades.

(1) Further strengthen the construction of health care in agricultural and nomadic areas.

This year each level of medical health unit must carefully study and carry out the instruction that "medical health care must put its emphasis on agricultural and nomadic areas, carry out the construction of medical health network points well, and solve the problem of lack of medicine and doctors." This was set out in the regional party committee's decision on further strengthening the work in the agricultural and nomadic areas.

Each area must carefully work to implement the "opinion on the reform and strengthening health work in agricultural and nomadic areas" produced by the following six work units: the health department, the finance and economy committee, the department of finance, and others [sic]. They must make special efforts to do the two sections of the task well: the construction of *xiang* health stations and the provision of primary health care.

According to the spirit of last year's document by the six units, including our department, during this and next year 300 *xiang* health stations are to be built. The regional finance and economy committee and the department of finance have already set up this supplementary fund plus the medical equipment installation fund for the *xiang* health stations this year.

The office providing construction items for basic unit health organisations under the health department decided to establish these first in 150 *xiang*. Regarding *xiang* health station construction, the past practice of allocation will be changed. The areas and counties which raise the basic construction funds and acquire personnel will be the first to be established.

Meanwhile, beginning this year, we must gradually repair the dangerous buildings in *xiang* health stations. Will you please report your situation to the relevant department at the end of this meeting so that the appropriate funds can be implemented. You will also need to report this application for funds to the departmental office providing [construction] items.

In the course of building *xiang* health stations, [...section in the original text not clear] the task is very touching. This is the spirit of serving the people heart and soul. Now is the time to strongly advocate and propagate this spirit. Comrade Labaduoji [Lawa or Lhakpa Dorje] is not only the example for village doctors; medical workers all over the country must learn from this spirit.

Soon, the Health Daily will publish Comrade Labaduoji's advanced deeds. Director Chen and vice party secretary Danzeng [Tenzin] of the Autonomous Region Party Committee have both written articles calling on medical workers all over the nation and the region to learn from him. I hope that each area will organise the broad masses of medical workers to start the activity of learning from Labaduoji.

Meanwhile, they must also firmly establish, propagate and study advanced models in their own areas and work units. Through the activity of learning from comrade Labaduoji, we will further strengthen the political and professional qualifications of the health team in our region.

Comrades: this year's task in health is very heavy indeed. I hope everyone will closely follow the policy of "one centre, two events, three guarantees" put forward by the regional party committee. We must go all out to overcome difficulties and make more contributions to realising the strategic target of "everyone enjoying health welfare" and welcome with supreme achievement the victorious opening of the Party's 14th Congress.

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[end TIN Doc.10(XB)]

## Tibetans on Birth Control: Interviews

Lhasa 1988 .....	46
Lhasa 1989 .....	46
Doctor from Gungho (Gonghe), Amdo, 1989 .....	47
Birth Control Operative, Kandze (Ganze), Kham, 1986 .....	49
Xiang-leader, Kandze (Ganze), 1987-9 .....	50
Lhasa 1989 .....	51
Lhasa 1989 .....	52
Lhasa and Kandze, 1988-90 .....	52
Doctor from Gungho (Gonghe), Amdo, 1990 .....	52
Nomad from Nagchu, 1990 .....	53
Chamdo, 1990 .....	53
Kandze (Ganze), 1990 .....	53
Nurse from Ngapa, Amdo (Sichuan), 1992 .....	54
Chabcha (Gonghe), Amdo-Qinghai, 1993 .....	55

This selection of interviews about "planned birth" in Tibet reflects mainly the view of women, including two doctors, who had been the subjects of the policy. It also includes statements by a birth control operative and a party official who were involved in implementing the policy.

The statements made here should be not regarded as authoritative in themselves, partly because it has not been possible for TIN to check the translations. The texts presented here are provisional translations or summaries, with the interviewers' questions deleted or paraphrased. These cannot therefore be regarded as reliable verbatim texts and should be checked against other sources or against the original tape recordings. Most of the interviewees asked to remain anonymous.

### Lhasa 1988

A Tibetan man from Lhasa, interviewed in 1988 (TIN Doc.TX2).

As you know, the Chinese have come into Tibet. Since they have come, they have imposed restrictions on child birth. If [more than] 2 children are born, they are fined 400 yuan. That's for the cadres. For the general public, they are not allowed [to have just] any child: if an [extra] child is born, the fine is 400 yuan. The two children allowance is for those who work in the offices. Now, in the villages, since the fine for child birth is 400 yuan, all the pregnant women found difficulty in getting a bed in hospital for abortion. They literally had to beg to be aborted, one after the other. They have to insist to be aborted. After the seventh day after the abortion, you have to vacate the bed for another whether or not you are well enough. They say "go". This is what is done. Now, this is what they do to make the Tibetan people extinct, even the few Tibetans left.

### Lhasa 1989

GN is a Tibetan man in his thirties interviewed in India in April 1990, a few months after he left Tibet. Until 1989 he had lived in Lhasa, where he worked as government official (T10(BB)/Test.10).

The Chinese authorities are telling couples that it is better not to have children at all but if they want children they should have only one. Tibetans working in offices can have two, but there should be three years' span between the first and the second child. You still have to ask permission after those three years to officials and if you are refused the right of birth for a second child and you still have it, then you have to pay a fine which can

be as high as 3,000 yuan (over two years' salary for a well-paid office worker). Theoretically other Tibetans can have three.

They announced it through posters which are meant to be read by the public and pamphlets which are distributed (like in hospitals). It is also publicised during public meetings or neighbourhood committee meetings and on Sundays or holidays, when everybody is at home, cars with loudspeakers will patrol the streets blaring information on this policy (how many children you are allowed to have or announcing plans about birth control). If you have a second child without permission you will not get a ration card for it unless you pay the fine. Non-Government employees can, according to the Chinese Constitution, have three children, but in practice a third child will not easily get a ration card or other basic necessities given to the first and second one. For Chinese and Tibetans working in Government offices, a second child (or third child) is not officially recognised and it will be a kind of non-existent child. In each Government office you have to inform the birth control desk via your leader, that you wish to produce a baby. If they refuse you permission you cannot ignore it if you want to keep your job. This policy of having a restricted number of children started in China and Tibet in 1975.

I have one child of four and a half years. The Chinese policy allowed all Tibetans working in offices to have two children with the prior permission of the Birth Control Office. When my child was three years old a made a request by letter to my office leader to have a second child which is the normal procedure you have to follow. The office leader agreed, so he forwarded the demand to the Birth Control Office. I still have no answer

today from this office. If by accident my wife had become pregnant without permission, we would have had to pay the 3000 yuan fine (to the Birth Control Office). We would have had to write a letter saying that we were sorry, that we knew we should not have done it etc... and ask for permission to give birth to this child, and beg for a ration card and a resident permit for him. The best you can get is permission to give birth to the child. If you don't get permission you have two solutions; either abort or keep the child knowing that you will not get a ration card and a resident permit for him, which means that he will not officially exist. If a family decides to have only one child in their whole family, the Chinese authorities will promise them a lot of advantages; a reward of 50 yuan and every month 5 extra yuan, free medical treatment until the child is 18 years old, no wait to get medical treatment and a good office work in the future. The parents are also told that they will not be separated from their child. But the Chinese are not keeping all their promises. In my family we only had one child; we got the 50 yuan and the 5 yuan monthly but when our child was sick we still had to wait for him to be treated.

#### Doctor from Gungho (Gonghe), Amdo, 1989

Tashi Drolma was a doctor of western medicine in Gungho (Chinese: Gonghe) in Tsholho (Hainan) Prefecture, in Qinghai Province. The eldest of nine children, she was trained at medical school in Xining from 1980-83. She was 26 years old when she was interviewed shortly after arrival in India in 1990. She has one child, born in 1986. [TIN Doc T17(BB)]

The Chinese started this policy in 1986. At that point government workers were allowed 2 children and non-government people were allowed three. Since 1988 government people are allowed 1 child (the same for the Chinese) and non-government people 2.

We received a letter at home about this in 1986. While in 1986 I saw a written instruction, in 1988 we just heard it from our leaders; we did not see the original directive from Peking. No specific reason was announced for this policy. They said it was not good to have too many children because there are so many Chinese. When the Chinese say we are not allowed to do this, that is it - there is never a reason given. There is over-population in China but there are not many Tibetans, we are a minority. It is not good if they do this to us, is it?

Even when we were allowed to have two children we were not allowed to have them any time we wanted. There is a waiting list for years and only two children per department from the office per year can be born. We were four or five in the department.

In July 1984 I went to Tsholho (Hainan) Civil Hospital in the Chabcha (Gonghe) region, a hospital where both western and Chinese medical sciences are practised together. [...] At present its infrastructure consists of: inpatient and outpatient wards, Chinese medical clinic, pediatrics, gynaecology and maternity ward, and an emergency ward. [...] There are altogether 276 doctors and nurses [...] out of which only about 60 are Tibetans. [...]

I find it hard to explain about the Gynaecology and Maternity sections. It seems to most that those who come there are either expectant mothers for delivery or

to check up for gynaecological disease. But it is a painful truth that they are there for neither purposes; they have come there (under pressure) to undergo a surgical operation according to the Chinese Government's Birth Planning. Most of those who come there are Tibetans from far-off areas. A number of them are there for sterilisation and others for 'yin chan' [abortion]. All of them have come at the insistence of the staff implementing the policies of the Chinese Government's Birth Planning.

[When I wanted to have a child I had to go to] my work unit, the Health Department. I had to ask there at a certain desk. From there it went to the main office, a higher authority, to get permission. In every work unit or office there is such a desk. They will get permission from a main Birth Planning Office. You are put on a waiting list for at least four and a half years after you are married to get the pass for your first child.

When we got married in 1984, I was 22. From a medical point of view, the best time for giving birth to children is from 23 to 25. Thinking of the well-being of ourselves as well as our undelivered child, we ran everywhere and with our best effort eventually we were able to get a permit.

I conceived a child in 1985 and delivered on March 10, 1986. My daughter's name is Dekyi Tsoemo. We wished she had been born the previous year but you could only give birth to a child after getting permission from the office where you are working, and from the regional and the district offices implementing the Government's birth planning policies. It had taken 2 years to get the pass. We had to bribe, pay money and use backdoor connections to get the permission to have the child. All together we paid 300 yuan, and had bought cigarettes and alcohol. Normally you need to wait 4-5 years and do not have to pay, but there are people who have already waited for more than 5 years because their turn has never come up. I know of cases like that.

When my daughter became 3 years old, we decided to have another child. But this time, there was no way to get a birth permit. So, all our family decided to pay 1,700 yuan for a birth permit and we got it. The Chinese Government has decreed that a fine must be paid by anyone who gives birth to an additional child going against their birth control planning. Each regional office decides the amount of money to be paid in such a case and in our Tsholho region the fine was 1,700 yuan.

On October 1988, the second child was conceived in my womb. My boss in the office came to know about it after two months. Because of my vomiting it became obvious. She would visit me almost everyday and used all means to try to convince me to have an abortion. I did not listen to her at all and made it clear to her that I would certainly give birth to my child. My Chinese boss, Ms. Hong Aphun Yin, head doctor of the Pharmacology section, told me, "Go home and think well. Return to work after you have thought well. You should do the abortion soon."

I simply let the time pass and after some time I went to see her. I told her that I would like to have the child and would pay any amount of money as a fine. She became furious and warned me, "If you do not want to listen and



insist on going your way, do it. Paying the fine is just a small matter. You will be punished by the Chairman. From your salary you will be given only 30% to live on and it will never be increased. Your child's name will not get registered. He or she will therefore not be allowed to go to nursery or school. Both of you could be dismissed from your jobs."

We did not know that it was such a serious matter or that there were as many regulations as my boss pointed out to me. We thought it would be alright to pay the fine and that we could then have our child. Initially, I even thought that she was simply frightening me. But later I learnt that there were clear cut, finalised documents on such matters which are circulated to officials, but were never announced to the public. Under such repressive condition, I had no choice but to have an abortion.

At that time the child in my womb was already two months and twenty-four days old. With a few more days I could have already crossed the 3 month child abortion period. The best time for child abortion (*ringong liuchan*) is between 45 to 50 days. But my child was already 84 days old so the only way to do an abortion was through the 'shug' 'jog bu dbyung' (*chaguan ringong liu chan*) technique. It causes a lot of bleeding and pain.

First they insert a sort of flexible rubber tube with a pointed end into the cervix. There is no medicine in this. They leave this inside for 24 hours. Because it stimulates the birth canal, which opens up slowly and gives way to the flow of blood, a lot of bleeding starts after 2 hours. After 1 day they take it out. It has become bigger inside so it is easier for the knife to get inside. They insert an instrument which has a sort of long handle with a knife at the end. They put this inside and start to move it around, cutting the fetus in pieces. Then it is very easy to extract.

The fetus then has been reduced to many small pieces and is removed by using a sort of compressor, with a pressure of around 200. The fetus is sucked into a sort of container which is then thrown away. This method is commonly used for abortion.

On January 3, 1989, at 4pm, my Chinese boss asked doctor Tao Ye Tain of the Birth Planning [unit] to insert a tube into my cervix. This was at my own hospital. Beside the lack of proper medical equipment to do that, I was not even given anaesthesia and thus experienced excruciating pain at the time. She unable to finish the insertion until at 4.30pm. A Chinese doctor from Qinghai, she had completed her midwife training at the Kokonor Provincial Health Care School. That was her field of specialisation. Before that she was a nurse at the Gynaecology and Maternity Ward of the Tsholho regional hospital. She was later transferred to the Go-ten Hospital's Birth Planning section.

On January 4, at 10:00 am Dr. Tao did a surgical operation on me, the abortion. Because of the previous day's tube insertion in my womb, the surgery became a little easier. First she inserted the instrument (*gua shao*) into my uterus, stirred and destroyed the child inside. And then, in order to remove the afterbirth completely, she scraped out the uterus in a clockwise direction twice. It took about three minutes. Then she turned on the sucking machine and inserted the tube into my

uterus. The fetus was sucked out along with the uterus lining. Because my child was slightly bigger than others [bigger pieces of flesh] often blocked the opening of the tube. The surgery took about half an hour. But an innocent being was mercilessly killed in that way. No words have the power to express the excruciating pain I experienced during the surgical operation. Over 85% of the women workers have to undergo the same torture and excruciating pain of surgery like me. It is even more tragic to remove a child of six to seven months old from a womb.

There was no medical treatment afterwards. You have to leave immediately after receiving this operation. You get 15 days off from work and miss your allowances. You have to pay for the treatment, about 17 yuan and 80 mao, to the hospital. You can stay for a night in the hospital but I went to my house.

I do not know what has been damaged and I think this method is used on many people. My physical and mental well-being have been badly affected. After the abortion I was not well. I had a period twice a month, sometimes for 15 days at a time. At the Delek Hospital [in India], they said that I have anaemia as a result. I also have back pain and pain in the appendix [?].

I do not know whether I can give birth to a child again. My body has not yet been able to regain its essential energy fluids. The affect of my abortion could be checked and rectified at a hospital with relatively better equipment facilities.

There are other forms of abortions. 'Lexun nor' is another way of abortion. According to this way, at first a specially prepared substance called 'lexun nor' is injected. This stops the child's oxygen and flow of blood; he is killed in the uterus through suffocation. About 12 hours[?] after the injection, the dead child comes out like a normal birth. It looks green, the medicine they insert is yellow. I have seen many like this, so many friends, family members. There are 8-9 of these abortions in a week and 9-12 sterilisations in a week. This is an average number, counting the number of beds. For instance, I remember Chagmo, 32, from Chabcha in Gungho county and Dorje Tso, 25, from Kyilkhug in Gungho. There are at least ten mothers whose names I do not know.

At the office where I worked, some staff had an abortion after one or two months of pregnancy. Digma Gyal, 25, a nurse at the pediatric ward, had to abort her second child in February 1989. Tsering Kyi, 27, a nurse at the Chinese Medical Clinic, had to abort her second child in August 1988. Palmo Gyal, 24, a nurse at the Gynaecology and Maternity Ward, had abort her second child in April 1989, and Gar Tso, 25, a nurse at the Children's Ward of the Gynaecology and Maternity Section, had to abort her second child in May 1989.

Even worse than that is to have an abortion with your first child, conceived after one year of marriage. For instance, Bin Trin, 24 a pediatric doctor, got married in 1988. She had to abort her first child because she could neither get a birth permit and she did not have power and money. Bin Trangkyi, 24, a nurse at the Emergency Ward, also had to abort her first child because she could not get a permit. The government is not in the slightest

concerned with whether or not a woman becomes infertile after the abortion. They never ask a woman about it. Everything I have mentioned above is an eye witness testimony. I am sure there have been many more cases like that which I do not know about. I worked at the *sdod bcas khang* hospital, and the Maternity Ward of the Birth Planning [Unit] was at the other hospital, the *Go-ten* Hospital. I have given here names of some women whom I know otherwise it would be impossible to provide the list with everyone's name.

There are many groups that go to villages to do abortions. It happened to a relative of mine, but I did not see it. My husband's sister-in-law was sterilised after she had two children. They do this to many women who have had 2 children.

In each district and then in the *xiang* we have a leader. After a woman has conceived a second child they come immediately and tell you that you have to be sterilised or else you will get a fine. Then they send you to the hospital; there is no way out of it. You do not have to pay, the state will pay for this treatment.

Even paying the money is not enough. There is no way out of going to the hospital. They will frighten and intimidate you by saying that if you do not go they will confiscate your farm or your animals or other things. They will not physically force you. There is a representative who officially keeps record of every 40-50 people. That way they will know who and when a child is conceived. They only [sterilise women] after 2 children. Seven days after the birth of a second child they will sterilise you. They will always do it to a third if you have two children. You are not allowed to deliver a baby at home.

[Whether they come to the house to persuade you or try to force you to go to the hospital] depends on the hospital. If you live far away they do not know immediately and there might be a slight chance of having 3 children. Every April they will go to each village with a midwife and they check efficiently and make preparations to sterilise. They will sterilise people immediately. If somebody escapes and they have a 3rd child the fine is 1,700 yuan. The child will not [get a ration card], and will not be allowed to go to school. They will not have any rights, and he or she will be like a non-existent person.

[After 1 child] they sometimes insert an IUD or give medicine as contraceptive. You are not allowed to deliver a second child, but I do not know whether they sterilise or not.

Each year there are 2-3,000 abortions and 3,500 sterilisations, including the nomads and the remote areas. This is our hospital. It is all in the statistics in the books. There is a quota and if you do not fulfil this they will cut your salary. Each doctor must abort 20 per month. For sterilisations, there is not a quota. There is only one special doctor for this work who has this quota. Fetuses who are more than 6 months old do not count as an abortion.

[Whether the women are aborted or sterilised] differs from country to country. It depends on the leaders. If you have weak health they might not operate on you but

tell you not to make any more children and give you contraception.

They will sterilise you, even if this is not your wish. A week after your delivery, you will be sterilised. They tell you to come to the hospital. There is no way out. We are afraid of the Chinese, that is why we go. They impose force - for nomads by [threatening to ?] confiscate sheep, for government workers by dismissal, for farmers by taking your land away. I did not see any physical force.

Out of 6 doctors only 1 is Tibetan. From a religious point of view, Tibetans do not like to do these jobs; it is like killing. There is one lady who works in this department but she does not actually carry out sterilisation and abortions.

Tibetans keep their abortions secret because of their faith in Buddha's teachings. Even if you have an abortion, you don't disclose it to others since it involved killing a human being. Contraceptive methods are better. Because there have been cases of conception taking place, Chinese contraceptive pills are not usually taken. Also, these pills and medicines could be damaging to your health. If you take contraceptive medicine regularly, you can get problems such as giddiness and vomiting which hampers your work. It makes me feel sick. Because of my poor kidneys, if I take it for a long time, they and my liver will become more damaged. It can also cause hypertension.

#### Birth Control Operative, Kandze (Ganze), Kham, 1986

T88B is a Tibetan man from Dartsedo who was trained first as an accountant and then as a birth control operative. In 1985, after two months training, he was sent to work on birth control programmes in a rural area of Kandze (Chinese: Ganze) prefecture in Sichuan province. He was interviewed in India in March 1990 (TIN Doc.T88(BB)).

I was put to work in the birth control hospital, as the Chinese needed a Tibetan educated by them to carry on this work. This hospital was mainly dealing with abortions and sterilisations. The officer running my department told me that as I had experience in many fields, had been educated by the Chinese Government and could speak Chinese, I was the sort of young and energetic person they would need to work in the new department. But before joining this department I was previously trained for 2 months to be able to carry out that kind of work.

I was trained in the same district [of Kandze]. From 1983 until 1985 the Chinese Government launched an abortion and sterilisation program. During that period a lot of directives were issued regarding this program: I had to study these documents during my 2 months training. After this training I was sent, in 1985, to a sub-district [*xiang*] to work.

But my job at that time was not to carry out sterilisations or abortions. My first work was taking a local census. I had a team working with me and we had to go around villages to try to find out how many families were living there, the age of each person, and list all this information. We had to report on each woman between the age of 15 and 45 as they were considered

as fertile. In 1986 I started to report on my investigations, then the abortions and sterilisation began. Experts (specialist doctors) from the Tibet Autonomous Region came to this hospital to work.

There were 13 in the team and I was their leader. I had to take the main responsibilities. There was no quota but there was a "Win Jin" (directive) which came from the Central government and was then transmitted to the District level. These directives were based on information passed to officials by the teams visiting villages. Then the Chinese officials would decide who should be aborted. A woman with 3 children would have the fourth one aborted. But there were cases of women with only one child being aborted; in those cases the main consideration was the time span between the first child and the new pregnancy.

When it was a couple, they had the choice of whether the woman or the man should be sterilised. The Chinese had different methods of sterilisation or abortion. I have been taught how to sterilise a man. It does not take long, about 15 minutes. It is just an injection in the testicles. The Chinese have a new chemical called "San du yie"; you just inject this very thick substance to sterilise a man or a woman. They first experimented it in Tibet. To sterilise women, they injected each ovary. They also had birth control methods like IUD: often, because of lack of hygiene, these insertions were followed by infections. I once witnessed the birth of a still born-baby with an huge head and an IUD stuck in his neck. I was eyewitness to cases of abortion as I worked as an interpreter for a Chinese doctor. There were two methods of abortion. One was the case of a woman who already had 2 children and was pregnant with a third. The doctor removed the five to six months old baby from the womb, and then killed the foetus with an injection. There was also another more common method to abort which I witnessed. First water was removed from the womb by syringe. Then medicine was given to the mother to deliver the baby still born. I first saw this method of abortion in June 1986. Hygiene was very poor. We had no other precautions than washing the instruments which were used with boiled water. Two women came back a few days after having an abortion with infections. One of them became paralysed. Another woman with post-abortion infection was found to have scissors in her womb. The scissors had been used to stop hemorrhage when the woman was bleeding excessively after her abortion.

I witnessed more than 2000 men and women in a district of about 40,000 inhabitants. In the village where I was working, we sterilised 163 people out of a population of 4953 in just one week in June 1986.

[If the person selected for sterilisation did not come to the hospital,] then he or she was fined from 1,500 to 1,800 yuan; it depends on the condition of the family.

In my sub-district, during June and July 1986, I personally witnessed about 13 cases of abortion where the doctor extracted the baby from the womb. The second method was more frequent and less painful: I saw about 50 cases of women aborted by taking the water out of the womb during this same period of 2 months.

[The longest-term pregnancy I have seen terminated was] at 7 months. After that they generally do not abort. They fine the woman. But I remember once that they aborted a woman who was more than 7 months pregnant. The doctors first discussed whether they should or should not abort her.

### **Xiang-leader, Kandze (Ganze), 1987-9**

EX is a Tibetan official in his late 20s who was interviewed in July 1990. He worked in a remote grassland village in Zorge county, Sichuan. He had completed junior middle school and then studied Tibetan medicine for two years, before being transferred to the local propaganda department. From 1984 to 1985 he worked as party secretary for one year at a village, and then went in about 1987 as temporary head of another rural *xiang* in Zorge county. he fled to India in April 1990. [T5(NH)]

We have only 12 staff in the *xiang* office. One is responsible for accountancy, one specialises in women's work, another one is responsible for the people's militia. Some are responsible for the birth control. Some are responsible for the youth league, one is responsible for preventing flooding. Then there is the party secretary. They are Chinese, Tibetan, Qiang and Hui. The one who is in charge of birth control is a Hui.

The birth control policy in Zorge county is very severe. The nomads and peasants can have 3 children, the cadres only 2, that's if they are Tibetans. Before 1987, all Chinese in that area could only have one child. Several years ago, in 1987, a new document came and announced that those Chinese cadres who have come to work in the Tibetan areas for more than 15 years could be [treated] like the Tibetan cadres. The treatment of the workers is the same as that of the peasants.

In our Tibetan nomadic or farming area, the living and working conditions are very poor, so very few Chinese wanted to come to work here. So the government proclaimed this document [allowing Chinese to have the same number of children as Tibetans] to encourage more Chinese to come and work here.

Chinese or Tibetans who do not follow the regulations of the document and produce more babies than expected are punished like this: the farmers are to be punished economically, cadres are deprived of their official positions and fined. They must also cannot be elected the representative of the people.

For the nomads and farmers, for every extra one baby that you gave birth to, you will be fined 1,000 yuan. These extra babies will also be deprived of the grain supply registration forms. There are many nomad families who break the rules. When they say a farmer can give birth to 3 babies, they cannot give [birth?] as freely as they intended, because each year a [fixed number] of birth permission certificates is issued. In my *xiang*, [with a total population of about 2,500] about 25 such certificates were issued each year, which meant therefore that only 25 can be born. Other wise the birth is still considered an out-of-plan birth, and the parents would be punished 1,000 yuan.

I am not sure about other *xiangs*. In our *xiang*, there were once 30 certificates issued in one year, and that was the most. We tried many times to get some more,



but failed. The situation in our village is that because of the birth control policy, the population has grown very old. It is true that the birth control policy in China has been hailed around the world, and I can see that too many population is not good, and so China took advantage of this and many countries supported it. But I can also see that because of the birth control, many minorities in China will drift towards extinction. I think the Tibetan nationality is in danger.

There are more birth than these 25 in the *xiang*, but as I said before they won't have the grain supply rations card.

As for the Chinese, if they have been there less than 15 years and have a second child, they will be fined. If it is a Tibetan cadre who is only allowed to have 2 babies, but he gives birth to a third child, then on the one hand, he will be fined 1,000 yuan, on the other, he will be reduced to a lower rank. He will also be deprived of any opportunity to earn bonuses, and he will not be able to stand for election as a representative of the people.

There are some benefits if you obey the policy. For example, if you only gave birth to one child, you are given certain fees and towels, and you get purchase priority for some rare goods each month.

The family planning official will go with the rest of the cadres in the *xiang*. Once the document from above reached our place, we would just carry it out. If there is any violations of the rules and there is any extra births, we send the officer to go to the places to punish those who have violated the rules. We go down some times to distribute the equipment [or propaganda?] for birth control. ... if someone has just [become pregnant with] their fourth baby, and immediately goes [to the county hospital] to have an abortion operation and will never give birth to any more children, then he will only be fined 500 instead of 1,000 yuan, and the fees for the hospital and the operation will be covered by the state.

If the couple refuse then they will be punished as I said just now: fined, and their rations and residence permits withdrawn. There was a case of a woman in our office who was forcibly sterilised. She had an operation probably last year [1989], or the year before last [1988]. The woman's name was Congluo and the man's name was Yongkou. There were also many others, but I can't remember all of their names. I was not at home at the time, but I learned that the man was a cadre, and that the county leaders had had private talks with him. The woman did not really want to go for an abortion, but she went there and did it anyway. I think the man agreed but the woman did not want to have one.

Doctors from the county who do abortions and sterilisation come from time to time to our *xiang*, on average about once a month. They are usually 5-6 people in a car, they came to do operation, or maybe it's only 2-3 people. I am not quite sure. They come to do the operations, abortion and sterilisations, for men and women. They stay in one hospital to do the operations. People are obliged to go to the hospital. If they don't and they give birth to extra babies, then they will be fined and many people could not afford that. The doctors don't travel around, they just stay in hospital. It is impossible for them to travel around as the area they go

to can only be covered on horseback, which many of them don't know how to do. Each brigade had someone who is responsible for the job of birth control. There was no automobile, so they go there by horse.

I have not heard of a woman being taken by [physical?] force to the *xiang* hospital to have an operation.

I am not sure about how many operations are done in one month, but I think about 30 in a year. These are sterilisations, [almost all women]. We'd have to report about this to the leaders above. We have a birth control official whose job is especially to do this.

There are two kinds of situations. One is that the woman is pregnant and there is no way to stop it, so she goes to have an abortion, and she could still have another baby. Another situation is that she is not pregnant, but she is afraid of getting pregnant so she goes to have a sterilisation. The woman, the wife of the cadres, she had both an abortion or a sterilisation.

I don't know if a child was ever killed after birth. I think it's possible if the couples don't want the baby and killed it, but I have never heard of the hospital staff killing a baby alive.

#### Lhasa 1989

2BB is a woman from a former noble family in Lhasa. She left Tibet in 1989 and was interviewed in India in 1990 [T2(BB) Respondent A]. She was an assistant cook in a small government office dealing with Chinese migrants. Her husband was a driver in another department. (TIN Doc. T2(BB)-B)

I have had three abortions. I had my first abortion when I was 30 years old. I already had two children and at that time my husband was just about to get a promotion in his office. If we had kept the child my husband would not have been promoted and we would have had to pay a fine, because I was pregnant without permission from the Chinese administration. So we decided to abort.

Before the Chinese enforced their birth control policy in 1982 there was no limit on Tibetan births. Now, as office staff, you only have the right to have two children. For Tibetans there is no way to get permission for a third child. For the Chinese there are ways.

A woman from Ba, between Kham and Amdo, injected a thick yellow liquid into my stomach, slightly to the right. Her Tibetan was very poor; she was speaking Chinese. The needle she used for this injection had a large hole, like the one used to donate blood. The syringe was big, about 2 dl. About 10 or 11 hours after the injection the child was born. The sensation was the same as a normal birth, very painful, but the child came out dead. He was already cold and stiff.

I had no local anaesthetic. Just after the delivery they checked that there were no complications and then told me to leave the hospital. I also had to take my dead child with me: I was told I could do whatever I liked with it. I had no other medical treatment. I did not leave [the foetus] at the hospital as it would have been thrown into the rubbish or down the toilets. I went home and then took it to be buried outside Lhasa.

I had no food given by the hospital. My relatives could bring me food or I could go to buy food from a restaurant near the hospital. In my ward there were about 18 or 20 beds, all occupied. Some of the women were there to have an abortion, the others to be sterilised.

The women who were there for sterilisation were not directly pressurised by the Chinese. But the law is inflexible, so for Tibetans there is no other choice. A Tibetan woman who produces a third child without permission has to pay a 500 yuan fine. The child is not eligible for school, and the parents will never be promoted.

My abortion was done by a medical student. I had to pay for the bed I occupied, the medical treatment and the injection. About 20 yuan.

There is a difference [between the treatment of Chinese and Tibetans], when a Chinese woman is the wife of a Chinese leader: then she will get the best treatment, the best doctors, and so on.

After three months I got pregnant again, even though I was taking the pill, once a day, after the first abortion. I went to the People's Hospital after 40 days. This time they used another method of abortion. I had to lie down, and without any anaesthetic, the doctor scraped inside my womb with a kind of spoon. It lasted about 20 minutes and then I went home.

I did not even try to get permission to keep the child. Under this birth control policy you need permission even for a first child. So, I knew I had no chance for a third. I went directly to the hospital to be aborted. It was done by a Tibetan doctor; he was working in the abortion department. These Tibetan doctors are trained in China, especially for abortions and sterilisations. When they come back they don't have the choice of another job. They are told by the Chinese Government that after a certain number of abortions they will have their salary increased. I didn't have to pay this time because I did not occupy a bed.

After the second abortion I changed the pill brand but it still did not prevent me from getting pregnant again. I again went to the People's Hospital when I was about 40 days pregnancy. They used the same method of abortion. After, I asked the doctor to fit me with an IUD because I had no confidence in the pill. I was aware of the possible risk, as they are made of iron and get rusty. I heard that this happens sometimes. After having this IUD I lost a lot of weight and have very heavy periods with dark blood and puss.

#### Lhasa, 1989

ZBA is a Tibetan woman from Lhasa who has had four children, all born in the 1970s before the birth control policy was introduced. She was interviewed in India in 1990. (TIN 2(BB)a)

They started doing abortions a long time ago. Chinese women are allowed one child, Tibetan women, two children. For the third child, you have to pay fines from 500 yuan up to 1,000 yuan. If you can pay the fine, then the third child will get a ration card, after one year or sometimes after 8 years. Otherwise he will not have a

ration card which means that he does not legally exist. For the 4th child you cannot get a ration card.

The Chinese do the abortions. They give injections in the middle of the stomach to women up to 5 months pregnant. They will operate if the woman is in the later stages of pregnancy.

They don't force ordinary people to have abortions but they impose fines. The fines are so high that the people are not able to afford them. Moreover, the ration cards are withheld in Lhasa. In nomadic areas, they would withhold the right of keeping domestic animals like livestock. Farmers would be deprived of their provisions.

The Chinese have also put restriction on child birth to 3 per family. For instance families which financially can support more children are restricted from having many. The poorest people, like in Lhokha, where I was born, are restricted to 2 children. I have had abortions four times.

According to the Chinese policy, after the second child, they sterilise the woman in hospital. In Lhasa they do this at the Chinese People's Hospital.

To get a ration card, you have to register each birth with the authorities. To have children you also first have to ask permission from the "Wu shin chu" department. Even if you are pregnant and this department refuses you permission to have another child, then you have to abort. They have a quota per year to keep to.

After 2 children you have to be sterilised or you will have to promise that you will not produce more than two, and take medicine, and even if you have already conceived you have to abort.

If you have a third child you are allowed to deliver at the hospital but you have then to pay a fine.

In the three different hospitals in Lhasa they do sometime abort women 5 to 8 months pregnant. Sometimes they kill the child when it is born. I have seen this. They give an injection in the belly. When I was 5 months pregnant, they aborted my child at the main People's Hospital in Lhasa. After this injection, the child came out the next day, stillborn.

#### Lhasa and Kandze, 1988-90

Jamyang Drolma, a 35 year old woman, was interviewed shortly after her arrival in India as a refugee in September, 1991. Originally from Kandze (Ganze) in Kham, Eastern Tibet, she had lived in Lhasa from 1978-88 where she worked as a street trader, and then lived in Kandze from 1988-90. She had one child and had divorced her husband in 1987. (T185M-MA.doc)

Officials used to come and advise us to either stop giving birth, get sterilised or use other systems not to give birth. There was a large number of people coming to say those things.

After one child, they would use force and sterilise people. Previously, in my village, many boys and men were given injections to stop birth. After that many women were taken to the hospital and sterilised or had other systems applied to them to stop birth. I did not see

it myself, but I heard there was a lady named Uzang who died due to an infection she got when they did it to her. This was recently, when I was back in Kandze (Ganze). I also heard that many youngsters were caught, put in vehicles and taken away to hospitals for sterilisations.

#### **Doctor from Gungho (Gonghe), Amdo, 1990**

TK, a 35 year old woman from Gonghe (Tibetan: Gungho/Chabcha) county in Qinghai Province, was interviewed in India in October, 1991. She is a doctor with three children, married to a government employee (TIN Doc.T1SM-AML).

Previously we were permitted to give birth to three children, then last year it was two. This year we were restricted to one. After that they were taking them forcibly to the hospital to be sterilised. I said this happened to her.

It was not unusual [for women to be forced to have abortions or sterilisations], it had happened many times. It still happens, and it will probably get worse because this year [1991] the limit on children has been changed to one, even for Tibetans.

They would threaten to impose large fines and demotions, and the children would not be allowed residence and ration cards, so that later they would not be able to have education or employment.

[Interviewer's note: She added later that when she said "forced" it didn't mean women were physically dragged away, but that the threat of other punishments (economic, employment, etc.) were in effect forced, because they had virtually no choice but to agree. She said that she did know that in the countryside women were sometimes pushed into vehicles and taken away to clinics to have abortions or be sterilised. Those tactics were not used in the towns or cities, and especially not for people employed in government offices or enterprises.]

I was sterilised. I was pregnant with a fourth child at the time. I can no longer have any more children as a result of what they did to me. The women know that this sterilisation will happen when they go for the abortion, but there is nothing they can do about it.

[Interviewer: At one point she was threatened with a large fine, demotion, and other things. The woman said that she was given an anaesthetic before the operation.]

This has happened to others and it was not unusual, but I don't know their names. Many women are taken, sometimes in a truck or jeep, to the hospital for forced sterilisations. Many develop ailments after sterilisation and cannot walk or even sit properly. There are many examples of personal tragedies: if a woman has one child, is sterilised and after that the child dies, there is no way to have another child because she is already sterilised. It is very upsetting for the family.

If the woman gets pregnant again after she has one child, two children or whatever the ceiling is, they will give her an injection. This kills the child inside the womb. Sometimes it would come down [presumably miscarriage] and sometimes it wouldn't come down.

Then they would extract the foetus by force. That way the woman cannot give birth to more than the limit, which was changed to one child this year [1991]. After that you would be sterilised.

Last year (1990) when the limit was two, if they gave birth after the second child, they would have to give 7,000 yuan as a fine. Then when the child reached seven years of age they wouldn't get an education. They used to tell them that if you have one child and then have another, [that child] won't get any ration, any [residence permit?], any education or any facility. That is the first threat. If that didn't work, they would take them to the hospital and forcibly sterilise them.

They say that they changed [the limit from three children to two and then to one] because of the increase of population, and they may not have enough food, housing, clothing or education if the population increases. There are also many Chinese who settle in Tibet who learn Tibetan language and scriptures and even write their names in Tibetan style.

#### **Nomad from Nagchu, 1990**

QE is a 30 year old nomad from Nagchu who was interviewed in India in November, 1991. He is married but has no children. (TIN Doc.T21SM-NG).

In my area the nomads are told to have two children. They come round to each house and say they should not have more than two children each. If they have more than two they will pay a fine of 1,000 yuan. I don't know any from his area, but I have heard that they pay fines in other villages.

#### **Chamdo, 1990**

UZ was interviewed in India in October, 1991 after her arrival from Chamdo, in Kham, in the eastern part of the TAR. She was 20 years old and lived mainly in Chamdo city, although her home was in a village in the countryside. She had 7 brothers and sisters and worked as a household helper for her aunt and uncle in Chamdo (TIN Doc.T3SM-CHM).

Tibetan families living in Chamdo can have only two children. If both parents are in service [meaning employed by a government work unit] they have to pay a fine of 1,500 yuan if they give birth to a third child. If only one is in service they have to pay 500 yuan.

#### **Kandze (Ganze), 1990**

ZL is a 41 year old woman from Dargye in Kandze (Ganze), Eastern Tibet, who was interviewed in India in November 1991. She is a farmer, with five children aged 10 to 20. She was sterilised after the birth of her fifth child in about 1982 (TIN Doc.T9SM-FRM).

In my village there were cases of abortion because if you want more than two children you have to pay a fine of 1,000 yuan. If you can't pay then you must go to the hospital to have an abortion.

[The Chinese authorities] have appointed one woman in every village to see if anyone has more than two or three children. If they are, they must either pay the fine or get an abortion. If that woman does her job well and no one has more than three children, then she will get a reward.



If someone has more than three children that woman, or man, will also be punished. They will not get any reward or promotion, and the woman who gave birth will be punished. There is a woman like this in my village. Her name is Pema. She has to tell everyone they shouldn't get pregnant and she has to watch every house to see if anyone gets pregnant.

All the villagers are very unhappy [about Pema]. They say that if they give birth to children, then they [the families] will look after the children; they will care for them. So why should they [the government] care? Why should they interfere in our lives? Everyone is very angry. This has been going on for about nine years [since about 1982].

[I stopped having children] when my last child was born, who is 10 years old now. At that time there was no rule so I did not have to pay any fine. After that the rules came in.

I had the sterilisation operation. I was very sad, but I knew that if I had more children I would not have the money to pay the fine. I was compelled to do it because of economic pressure.

[If there were no fines, no penalties, no rules] I would have had more children. There are other women there in my village who are in this position. After the third child nearly all of them are sterilised. If they had free choice and no threat of punishment, they would all have preferred more children.

The limit now is three children. [this seems to contradict earlier statements]. I am not sure exactly, but I know that women can give birth to up to three children, and there must be a gap of two or three years between births. If someone gives birth every year they have to pay a little fine. I am not sure how much it is. My area is quite remote, but I have heard there are places where there is a limit of two. They are farming places.

#### Nurse from Ngapa, Amdo (Sichuan), 1992

"Nyima" is a former nurse in a hospital at sub-district level in Ngapa County, Amdo (now part of Sichuan Province). Her work in the hospital consisted in giving injections and handing out medicines. She arrived in India in 1992 and was interviewed there in September 1993 (TIN Doc AA93oc03).

[Interviewer's summary:] The birth control policies: From 1982 to 1990 the limit for child births for Tibetans was 2 children in Ngapa, but many people have 4 to 6 children. Now Tibetans can have only one child. In July 1991 an announcement appeared in the villages in her county as posters saying that girls who choose to get sterilised without having a baby would get a reward of 3,000 yuan. It also said that women who give birth to their second child will be fined 7,000 yuan. The announcement was only written in Chinese. When people haven't got money to pay the fine, the authorities confiscate animals or other property.

Nyima once met a pregnant friend in Jinhua county who complained that she wasn't allowed to have her child and that the police were going to take her horse if she had it. Nyima's father's sister's daughter gave birth to her second child and tried to keep it secret. "The Chinese" found out though, and came to her house,

saying that it was illegal. She pleaded them for permission to have her child. She finally had to sell her ornaments to be able to pay a large fine.

In a particular hospital at district level in Ngapa County there are 4 sections: one for Tibetan medicine (*zang yi*), one for allopathic medicine ("a hospital", *yi yuan*), and two sections where abortions are carried out. Each of the 4 sections has an office, a dispensary, and its own nurses. The employees eat in a common dining hall. The leader of the whole hospital is entitled a director or superintendent. Altogether the hospital consists of about 8 buildings. Working hours during summer are 8.30am to 5.30pm and in the winter 9am to 4.30 or 5pm.

One of the abortion sections (the *bao jian zhan*) is for women who are one month to 45 days pregnant. This operation is called *jiao zheng* and is performed by one doctor and two nurses. Women who are more than two months pregnant have to wait until they are 5 months pregnant before they can have an abortion. In this case they are dealt with by the second abortion section (*ji hua shengyu ban gon shi*) which carries out abortions on women who are between 5 and 7 months pregnant.

All hospitals above *xiang* level in Tibet have these two sections that practice abortions. They are branches of the same division at county level. Here the sections are administered by offices of the Family Planning Committee.

The operation in the *Jihua sheng* is called *bi yun yao*. Nyima was told about the operation by nurses working in this section. The woman receives and injection 5 to 7 hours before the operation and is free to go outside the hospital until the operation starts. In Nyima's hospital only one doctor performed these operations. In case of a rush a doctor from the county town came to assist him. During the operation the doctor is assisted by 4 nurses. One nurse (*zhu shao*) passes the instrument to the doctor, another gives massage or heats some special water for the operation, the third takes the baby out, and the fourth nurse records. The *Jihua sheng* doctor gives the injection that kills the baby. He inserts a needle into the forehead of the baby, which doesn't die immediately. After delivery it often cries a few times before it dies. Nyima's section is close to the *Ji ua sheng* so she frequently heard the babies cry. They would cry 3 to 4 times and then silence would follow.

The operation takes half an hour. When Nyima visited the section one day to collect birth control medicines (it was normally another person who did this) she saw 20 pregnant women waiting there. After the operation the women are sometimes allowed to stay in the hospital to heal, but sometimes they are not. This is different from hospital to hospital.

Nyima often saw dead babies in the toilets mixed with excrements. In the course of a week she would see dead babies in the toilets several times. Sometimes one, sometimes 2 to 3 at a time. They were all 6 to 7 months old and about 20 to 25 cm long.

Sterilisations (*jieza*) are often - but not always - performed together with the abortions. Nyima knew cases of women who had become pregnant after having had an abortion. Sterilisations are also carried out if

women go to the hospital to deliver their first child. Most Tibetan women give birth at home. When the women go to the hospital for other reasons they also risk being sterilised. Nyima recalls one girl, who after being operated for liver problems, found that she had also been sterilised. Because of the danger of being sterilised, Tibetan women try to avoid going to the hospitals.

When a woman carries the second child, officers from the *Bao jian zhan* and the *Jihua sheng* come to her home and advise her to go to the hospital. Usually they will explain that there is, or might be, something wrong with the child and that the woman is better off going to the hospital to have a medical check-up.

Nyima thinks that there is a rule saying that doctors can't tell the pregnant women about the forthcoming abortions. In general, the officers don't tell the mother that she is going to have an abortion. It is only if the woman happens to know the doctors or others in the hospital that she is told that she is going to have an abortion. They also say that they are not supposed to disclose this information. It is secret. Nyima has heard this from both the patients and from doctors at her hospital. Nowadays, though, the women know what is going to happen. Everybody who comes to the hospital to have an abortion cry.

Nyima knows a case of a couple that had a daughter. The man wanted a son, so his wife became pregnant and promised him to try to pay the fine for the second child while he was on a long business trip. The Chinese came to visit her and encouraged her to go to the hospital. They advised her to have a check-up to determine whether the baby was in a healthy condition. She didn't go. One day a woman came to her house and told her that somebody wanted to see her. Outside was a Chinese who spoke Tibetan. He forced her into his jeep and brought her to the hospital where she had an abortion. When her husband came back he blamed her for going to the hospital. After that they were always fighting and finally the man took the daughter with him and divorced his wife.

### Chabcha (Gonghe), Amdo-Qinghai, 1993

Sonam Tsering, age 24, is a Tibetan from Chabcha (Gonghe) in Tsholho, Qinghai Province, who worked in the local official theatre troupe. He was interviewed in India four weeks after his arrival there with his wife in December '93 (TIN Doc 12(FV)).

[interviewer's summary:] The family planning policy in Amdo started in 1982. Officials came to Sonam's district and contacted the *gotri* [leader]. They announced the rules on the size of a family: nomads and farmers were allowed two children, officials only one. Sonam Tsering was considered an official as his drama and dance group was an official Chinese institution. Therefore, he and his wife were only allowed 1 child. When their second child was born, they had to pay a fine of 2000 yuan each year, until their child would reach the age of ten. After the birth of the second child, Kalsang Kyi (Sonam's wife) had to go to hospital every month to receive a 'pink pill' or an injection with contraceptive fluid. (He showed me an ampule of the same substance: (hydroxyprogesterone caproate composita 250 mg).

Kalsang started to get pains in her abdomen after she was forced to take these pills or injections. Once Kalsang Kyi did not go to hospital to get her contraceptives. She had gone on a pilgrimage and couldn't come back in time. She was fined 300 yuan for not turning up. After some time, Kalsang was put on a list of women who had to be sterilised. She was not operated on, as the whole family escaped before her operation was due.

According to Sonam, there is an annual quota of 100 women who have to be sterilised. He knows two women who died after their sterilisation. Tsomo died 2 years ago. She was a nomad, about 32 years old and had 2 children. Dorje Kyi died in '93. She was a nomad, she had three children and was about 28 years old.

Some women who were listed for a forced sterilisation or abortion tried to escape, but most of them had nowhere to go. Some of them attempted suicide, as they felt so desperate.

According to Sonam Tsering, the authorities are trying to decrease the number of Tibetans. In his district about 60% of the population is Chinese. Chinese farmers are coming to the area in large numbers to settle down permanently.

end

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